

**Township of Berkeley Heights**  
**2017 CAT LICENSE APPLICATION**

Name of Owner: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Cat's Name: \_\_\_\_\_ Sex: Male \_\_\_\_\_ Female \_\_\_\_\_

Cat's Age / Date of Birth: \_\_\_\_\_

Hair: Long \_\_\_\_\_ Medium \_\_\_\_\_ Short \_\_\_\_\_

Breed: \_\_\_\_\_ Color: \_\_\_\_\_

Name of Veterinarian: \_\_\_\_\_

Spayed or Neutered: No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, date: \_\_\_\_\_

Rabies Inoculation: Date Expires: \_\_\_\_\_ Date Given: \_\_\_\_\_

Owner's Signature: \_\_\_\_\_

**Payment and Processing Information:**

\$10.00 – Each Cat

\$5.00 – Late Fee Added After February 28, 2017

(Late fee does not apply to Cats new to Berkeley Heights)

Make Check Payable to Township of Berkeley Heights

Submit Check and Application to the Clerk's Office, 29 Park Avenue, Berkeley Heights, NJ 07922

**Rabies Information:**

Rabies Vaccination Certificate must be submitted with license application and must be valid through October 31, 2017.

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Questions please call: 908-464-2700, x2114

Clerk's Office

29 Park Avenue,

Berkeley Heights, NJ 07922

[www.berkeleyheightstwpnj.gov](http://www.berkeleyheightstwpnj.gov)