

Township of  
Southampton  
5 Retreat Road  
Southampton  
New Jersey 08088  
(609) 859-2736

**License fees are as follows:**

*\$9.00 – This fee is for pets that have been spayed or neutered. To qualify, please provide proof of rabies vaccination, and complete the affidavit of spayed or neutering.*

*\$12.00 – this is for pets that have not been spayed or neutered. To qualify, please provide proof of rabies vaccination.*

*\*\*Per State regulations rabies vaccinations must not expire prior to November 1<sup>st</sup> of the year the license is purchased.\*\**

If you had a dog licensed in Southampton Township in the year 2016 and you no longer have the dog, please let us know by calling the Township Office at (609) 859-2736. This information will help to update our records and avoid further notices being sent.



It's that time again! DOG LICENSES are due for renewal prior to March 31, 2017. Dog Licenses may be purchased at the Township Building, Monday through Friday, between the hours of 8:30 a.m. through 4:00 p.m.

We realize that so many are tired of standing in long lines from the holiday season. For the convenience to our residents, we are accepting applications by mail. If you would like to take advantage of this expedited option, please send:

- Completed form
- Needed documentation (**Please see side for additional details**)
- Self-Addressed, stamped envelope
- Check, Money Order, or Cashier Check made payable to the Township of Southampton (Please avoid sending cash.)

Licenses obtained after March 31, 2017 will be assessed a **\$5.00 late fee.**

**LICENSE APPLICATION FORM**

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ Email: \_\_\_\_\_

DOG (SEX) M F BREED: \_\_\_\_\_ AGE: \_\_\_\_\_

HAIR: SHORT MEDIUM LONG

COLOR & MARKINGS: \_\_\_\_\_

PET'S NAME: \_\_\_\_\_

RABIES VACCINATION (COMPULSORY) DATE EXPIRES: \_\_\_\_\_

\*SPAYED/NEUTERED BY: \_\_\_\_\_

**\*This information is necessary to avoid the \$3.00 additional charge**

DATE WAS SPAYED OR NEUTERED: \_\_\_\_\_

**AFFIDAVIT**

I, \_\_\_\_\_, residing at \_\_\_\_\_

am the owner of \_\_\_\_\_. I swear and upon my oath, state that the dog

was spayed or neutered on \_\_\_\_\_ by Dr. \_\_\_\_\_

at \_\_\_\_\_