

**PRINCETON TOWNSHIP  
CLERK'S OFFICE  
400 Witherspoon Street, Princeton, NJ 08540**

**Dog License Registration Form**

**Owners Name:** \_\_\_\_\_

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

**Phone:** \_\_\_\_\_

**Dogs Name:** \_\_\_\_\_

**Breed:** \_\_\_\_\_

**Sex:** \_\_\_\_\_

**Hair Long or Short:** \_\_\_\_\_

**Color/Markings:** \_\_\_\_\_

**Age:** \_\_\_\_\_

**Rabies Vaccination Certificate Must Be Provided.**

**Neutered/Spayed: No \_\_\_\_\_ Yes \_\_\_\_\_ (proof must be provided)**

**In order to obtain a license, be sure to enclose a valid rabies vaccination and proof of spaying/neutering, if applicable. The certificate of rabies vaccination cannot expire prior to November 1st of the licensing year.**