

DOG PARK APPLICATION

Owners Name:

Address:

Phone #

Email Address:

Animal's Name:

Rabies expiration:

Birthdate:

Spayed/Neutered: ____ Yes ____ No

Male/Female:

Breed:

Color/Markings:

2021 NJ State License #:

Municipality:

Fee: \$5.00 Resident

\$10.00 Non-resident

Application is to be completed and submitted to the Borough Clerk's office at 15 Park Avenue,
Maywood, NJ 07607

DO NOT WRITE BELOW THE LINE

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License # _____ Date Issued: _____

Payment: _____ cash/check/money order Check # _____

Issued by: _____