



TOWNSHIP OF IRVINGTON  
DEPARTMENT OF HEALTH  
MUNICIPAL BUILDING  
1 CIVIC SQUARE, IRVINGTON, NJ 07111  
TEL: (973) 399-6647  
FAX: (973) 416-6400

The Honorable Tony Vauss  
Mayor

Dr. Monique S. Griffith  
Acting, Director of Health

### DOG / CAT LICENSE APPLICATION

Please provide current proof of your dog's or cat's rabies vaccination.

This license is to be renewed by February 1st of every year.

**FEES:**

Cat: **\$21.00**

Regular/Non-Neutered Dogs: **\$21.00**

Neutered/Spayed Dogs (Proof of spayed required): **\$21.00**

**All fees are payable by check or money order.**

Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Previous address if moved since last License received: \_\_\_\_\_

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Name of Pet: \_\_\_\_\_ Dog:  Cat:  (please check one)

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

Color and/or Markings: \_\_\_\_\_

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

Hair:  Long /  Short

Neutered /  Non-Neutered

Male /  Female

**\*\* Renewal Only: If dog/cat is deceased, check here  \*\***