



**TOWNSHIP OF CHERRY HILL**  
 ANIMAL CONTROL SERVICE  
 820 Mercer Street  
 Cherry Hill, NJ 08002  
 856-488-7892

## CAT LICENSE APPLICATION

<u><b>NEVER LICENSED</b></u> <b>NEW CATS</b> Neutered - \$22.20 Non-neutered-\$25.20	<u><b>RENEWAL</b></u> Before JULY 31 <sup>st</sup> Neutered - \$22.20 Non-neutered-\$25.20	<u><b>(Renewal - LATE)</b></u> After JULY 31 <sup>st</sup> Neutered - \$32.20 Non-neutered-\$35.20
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### CAT LICENSE APPLICATION/REGISTRATION {PLEASE PRINT}

**OWNER INFORMATION**

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

Telephone No. \_\_\_\_\_ ADDRESS \_\_\_\_\_

ZIP CODE \_\_\_\_\_

Has cat been previously licensed in Cherry Hill? YES \_\_\_ NO \_\_\_

**PET INFORMATION**

NAME \_\_\_\_\_ SEX \_\_\_ AGE \_\_\_yrs HAIR- Long\_\_\_Med\_\_\_Short\_\_\_

BREED \_\_\_\_\_ COLOR \_\_\_\_\_

DATE OF RABIES EXPIRATION: \_\_\_/\_\_\_/\_\_\_ **Please attach copy only**  
DO NOT SEND ORIGINAL

IS CAT NEUTERED OR SPAYED? YES \_\_\_ NO \_\_\_

Name/Address/Telephone No. of Veterinarian \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

**Please be sure to enclose:**

1. Check or money order payable to: TOWNSHIP OF CHERRY HILL
2. Copy of current Rabies Vaccination Certificate (**COPY ONLY**)  
 (Please do not send original)

OFFICE USE ONLY

LICENSE NO. \_\_\_\_\_ AMOUNT PAID \_\_\_\_\_ DATE RECEIPTED \_\_\_\_\_

RECEIPT NO. \_\_\_\_\_ RECEIVED BY \_\_\_\_\_