

Borough of
BARRINGTON
New Jersey

229 Trenton Avenue
Barrington, NJ 08007
Tel. (856) 547-0706
Fax: (856) 547-1392
Email: info@barringtonboro.com
Website: www.barringtonboro.com

Dear Pet Owner:

Please be advised that all dogs and cats in the Borough of Barrington need to be licensed. We must have proof of current rabies vaccination in order to issue a license. The fee is \$12.00 for a spayed/neutered animal and \$15.00 for a non-spayed/neutered animal. Checks are made payable to the Borough of Barrington. The new licensing period runs from October 1 through September 30 of the following year and that will continue going forward. **ALL LICENSES EXPIRE SEPTEMBER 30. There is a grace period but if the license is not renewed by November 30, a \$10.00 late fee is added.** For new residents there is no late fee but your pet needs to be licensed within 30 days of moving into Barrington.

You can get a license by either mailing in the below form along with proof of rabies expiration and a check or you can put that information in an envelope and put in our payment drop box in the borough hall parking lot. Complete the form below and don't forget proof of rabies vaccination and payment. Your license and tag(s) will be mailed back to you.

Important—your pet must have a current rabies vaccination. Please provide evidence of a current rabies vaccination including expiration date. If your dog is a guide, assistance or therapy dog, we need evidence of that as well.

All revenue raised from pet licensing is used for animal control costs including the rabies clinic, the services of the animal control officer and animal shelter services. Funds are also used for the T-N-R program for feral cats and are used to pay for spaying/neutering at a low-cost clinic.

Thank you.

Terry Shannon

Terry Shannon
Municipal Clerk

Owner's first and last name: _____

Email address: _____

Address: _____

Pet name: _____

Type: Dog _____ Cat _____

Breed: _____

Color: _____

Hair type: Short _____ Medium _____ Long _____

Spayed/Neutered? Yes _____ No _____

Size: Small _____ Medium _____ Large _____

Spay/neuter date: _____

Sex: Male _____ Female _____

Veterinarian: _____

Birth date: _____

Vet's phone: _____

If actual birthdate is unknown, please approximate month and year.

Rabies expiration date: _____

Guide/assistance dog: Yes _____ No _____