



Application for a Kennel/Animal Shelter/Pet Shop License

General Information:

Name of Business: _____

Type of Business: (check one) Kennel Shelter Pet Shop

Address: _____

Contact Name: _____ Title: _____

Phone #: _____ Fax #: _____

E-mail Address: _____

Address of Kennel/Shelter/Pet Shop: _____

License is valid for one year and must be renewed in the month prior to expiration. A copy of the facility's current, satisfactorily rated Burlington County Health Report must be submitted with this application.

License Fee: \$40 each year

If registering by mail, enclose check payable to Eastampton Township and a self addressed stamped envelope.

Submit to: EASTAMPTON TOWNSHIP CLERK
12 MANOR HOUSE COURT
EASTAMPTON, NJ 08060