



TOWNSHIP OF FRANKLIN

1571 Delsea Drive

FRANKLINVILLE, NEW JERSEY 08322

Phone: 856-694-1234 Fax: 856-694-1279

Hours 8:00 AM to 3:30 PM

2026 Dog License Renewal Form

Instructions:

- NEW RABIES CLINIC INFO:** In order to get a three-year rabies shot for your animal at the rabies clinic, you must bring your last rabies certificate with you. If you do not, the animal will get a one year shot.
- You must provide proof of rabies that is valid until at least November 1, 2026. You may call the Municipal Clerk’s Office to check what rabies expiration date we have on file. Any rabies vaccination, which expires before November 1, 2026, will require an updated vaccine prior to issuance of a 2026 license. If your veterinarian will not vaccinate your dog early due to a medical condition, please obtain an exemption form from the Municipal Clerk’s Office for your Veterinarian to fill out and sign. If the rabies certificate you provided previously is good through 2026, you do not need to send it in again with your renewal.
- Provide proof of spay/neuter – unless already provided (if applicable).
- An envelope is enclosed for your convenience. Make check payable to: Township of Franklin. **We now accept credit cards with a nominal convenience fee assessed at Town Hall. You can call to make a payment over the phone as long as your rabies certificate is up to date.**
- Include a **self-addressed stamped envelope** for the license to be mailed back to you along with the paperwork you send in. If you have multiple dogs, it may require extra postage on the envelope.
- If you no longer have the dog or have moved out of Franklin Township, **you must call 694-1234** so that we can remove the dog from our records.
- All Dog Licenses are due by **March 2, 2026**. If you renew after that date, there will be a \$7.00 per dog late fee.

**FREE RABIES CLINIC
PUBLIC WORKS GARAGE
234 BROAD ST., MALAGA (use Newfield, NJ 08344 if using a GPS)
SATURDAY, FEBRUARY 7, 2026
CATS: 9:00 – 10:00 AM
DOGS: 10:00 – 1:00 PM**

Dogs must be on leash and Cats must be in Carrier

Return this portion with your payment. You may copy this form if needed.

Name of Owner: _____ Phone: _____

Address: _____

Name of Dog (s) _____ Breed: _____

Male or Female: Age: _____ Hair Length: Short, Medium, Long Color: _____
(Circle One) (Circle One)

Dog License Fees: Spayed/Neutered: **\$7.00**
Non-Spayed/Non-Neutered: **\$10.00**