

## Animal Surrender Form

I hereby certify that I am a resident of the Town of Boonton and the rightful owner / keeper / caretaker / custodian of the animal(s) who is/are the subject of this Animal Surrender Form, hereinafter referred to as "the animal." I hereby surrender any and all property rights to the animal. I certify that no other person has a right of property to the animal. I understand that by surrendering my property rights to the animal, the animal may be transferred into the custody of an animal shelter or impound facility.

I also hereby certify that the animal **HAS | HAS NOT [circle one]** bitten or scratched a human or another animal within the past 10 days. I understand that once I relinquish the animal, the animal will not be available for return. I further certify that I have read and understand the terms of this Animal Surrender Form.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

**Resident Certification Document Type:** \_\_\_\_\_

**ID #:** \_\_\_\_\_

**Please complete the appropriate section(s) below (include all animals).**

1.  Cat  Dog  Female  Male  Kitten  Puppy  Adult  Senior  
Name \_\_\_\_\_ Breed \_\_\_\_\_ Color \_\_\_\_\_

2.  Cat  Dog  Female  Male  Kitten  Puppy  Adult  Senior  
Name \_\_\_\_\_ Breed \_\_\_\_\_ Color \_\_\_\_\_

3.  Cat  Dog  Female  Male  Kitten  Puppy  Adult  Senior  
Name \_\_\_\_\_ Breed \_\_\_\_\_ Color \_\_\_\_\_

4. Litter of \_\_\_\_\_ kittens/puppies No. of females \_\_\_\_\_ No. of males \_\_\_\_\_  
Breed \_\_\_\_\_ Color \_\_\_\_\_

**There is a non-refundable charge of \$50 for each animal surrendered.**

**Town of Boonton, Health Department, 100 Washington Street, Boonton, NJ 07005**

Paid  Cash  Check # \_\_\_\_\_ Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_