



**Hamilton Township Animal Shelter**

2100 Sylvan Avenue

Hamilton, NJ 08610

609-890-3550

[animal-shelter@hamiltonnj.com](mailto:animal-shelter@hamiltonnj.com)

## Rescue-Transfer Application

Please allow us 72 hours to process your application. Fill out the application completely to speed up the process.

### Transfer Organization Information

Organization name: \_\_\_\_\_

Address: \_\_\_\_\_

501(c)3/EIN# \_\_\_\_\_

Website address: \_\_\_\_\_

Social media information:

FaceBook \_\_\_\_\_ Instagram \_\_\_\_\_

President/Founder Name: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Rescue contact (if different) Name: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

List three references we may call (veterinarians, fosters, trainers, etc.)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Out of state rescue requiring health certificate, provide full street address. (No P.O. Boxes)

\_\_\_\_\_

List individuals in your rescue organization authorized to pick up animals for transport to your rescue:

\_\_\_\_\_

\_\_\_\_\_