



West New York Health Department

428 - 60th Street, Room 30
West New York, N.J. 07093
(201) 295-5070 Fax (201) 295-0769

Felix Roque, M.D.
Mayor

Vincent A. Rivelli, M.S.
Health Officer

Maria Alvarez
Registrar of Vital Statistics

Form for Dog License(s)

Neutered	\$ 8.00	Non-Neutered	\$ 11.00
Spayed	\$ 8.00	Non-Spayed	\$ 11.00

Renewal can be made in person at this office (MONDAY THRU FRIDAY 9:00AM – 3:00PM)

Proof of recent Rabies Vaccination
Proof that your dog has been neutered or spayed

PLEASE LEASH, CURB AND CLEAN AFTER YOUR DOG.

IT IS THE LAW

OWNER'S NAME: _____
ADDRESS: _____ Apt.#: _____
TELEPHONE # _____
DOG'S NAME: _____ BREED: _____
SEX _____ AGE: _____ COLOR: _____
RABIES VACCINATION DUE: _____
NEUTERED OR SPAYED: \$8.00 _____ NON-NEUTERED OR NON-SPAYED \$11.00 _____

MAKE PAYMENT BY MONEY ORDER ONLY: W.N.Y. HEALTH DEPT.