



## West New York Health Department

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

**Gabriel Rodriguez**  
Commissioner of Revenue & Finance

**Janet Castro**  
Health Officer

**Maria Alvarez**  
Registrar of Vital Statistics

Dear Dog Owner:

It has come to our attention that you have not obtained a Dog License for your dog. Please register your dog with the West New York Health Department as soon as possible otherwise you may be subject to fines.

Neutered	\$8.00	Non—Neutered	\$11.00
Spayed	\$8.00	Non— Spayed	\$11.00

You may pay this fee in person at the **West New York Health Department** located at the above address. We are open Monday—Friday 9:00 am—3:00 pm for license renewals. You may also pay for the registration of your dog by mail. Place ALL 4 documents in an envelope:

### Money Order Payable to: West New York Health Department

1. Send a self—addressed, stamped envelope.
2. Proof of recent rabies vaccination.
3. Proof that your dog has been neutered or spayed.

**Summons** will be issue to those dog owners who violate the Dog Registration Law. **The penalty for not registering your dog may be as high as \$500.00 per offence and an appearance in court!** Dog feces pollute our environment and can cause disease to spread. It is also a safety hazard when one steps on it. NEVER allow your dog to run loose without a leash, it can use auto accident and dog bites.

### **Please Leash, Curb, And Clean After Your Dog. It's The LAW!**

Please cooperate and take pride in yourself, your pet and your community.

Owner's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

Dog's Name: \_\_\_\_\_ Breed: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Color: \_\_\_\_\_

Rabies Due Date: \_\_\_\_\_ Neutered/Spayed \$8.00 \_\_\_\_\_ Non-Neutered/Spayed \$11.00 \_\_\_\_\_