

MAYOR
ALBIO SIRES | PUBLIC SAFETY

COMMISSIONERS
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MARIELKA A. DIAZ | PUBLIC AFFAIRS
MARCOS A. ARROYO | PUBLIC WORKS

DEPARTMENT OF HEALTH
STEFANIA TATOLLI | DIRECTOR & HEALTH OFFICER

TOWN OF WEST NEW YORK
COUNTY OF HUDSON, NEW JERSEY



MUNICIPAL BUILDING
428-60th STREET
WEST NEW YORK, NEW JERSEY 07093
o. (201).295.5070
f. (201).295.0769

OFFICE LOCATIONS
PUBLIC LIBRARY 425-60th STREET
(201).295.5135
SENIOR CENTER 515-54th STREET
(201).295.5162/5144
FIRE PREVENTION 6015 TYLER PLACE
(201).295.5220
PUBLIC WORKS 6300 BROADWAY
(201).295.5230/5231
PARKING SERVICES 224-60th STREET
(201).295.1575
WEST NEW YORK, NEW JERSEY 07093

DOG LICENSE APPLICATION

NEW LICENSE LICENSE RENEWAL

ALL DOG LICENSE RENEWALS MUST BE EFFECTIVE ON FEBRUARY 1ST YEARLY.
You can renew the license in person or by mail **MONDAY THRU FRIDAY, 9:00 AM - 3:00 PM**

PLEASE SUBMIT THE FOLLOWING FORM AND INCLUDE THE FOLLOWING DOCUMENTS:

1. PROOF OF RABIES VACCINATION
2. SERVICE DOG - PROOF DOCUMENTS
3. PROOF OF NEUTERED/ SPAYED
4. MONEY ORDER **ONLY PAYABLE TO: WNY HEALTH DEPARTMENT**

\$ NEUTERED	\$8.00	NON-NEURETED	\$11.00
SPAYED	\$8.00	NON-SPAYED	\$11.00

Please renew Early. We do not enjoy issuing summons to those who violate the license or rabies vaccination law. The penalty for not renewing your license on time is up to \$500.00 per offense.

PLEASE LEASH, CURB, AND CLEAN AFTER YOUR DOG. IT'S THE LAW!

Owner's Name: _____ Date: _____
 Address: _____ Apt# _____ Telephone: _____
 Email: _____
 Dog's Sex: Male Female Breed: _____ Age: _____
 Hair Color: _____ Hair Length: Short Medium Long
 Dog's Name: _____
 Spayed/ Neutered: Yes No Date: _____
 Rabies Vaccination Expiration Date: _____

PICK UP: MAIL

The Town of West New York is proud to be a drug free workplace and an equal opportunity employer.

