

Dog License Application

Return to: Health Department 705 Kinderkamack Road River Edge, NJ 07661 201-599-6299 Fees: Altered.....\$13.00 Unaltered...\$16.00 Late Fee: \$6.00 (for renewals after February 1st)

Make checks payable to: Borough of River Edge

Please print the following information:

Mailing Address:			
Dog's Sex:M	[F	Neutered	Spayed
Breed:			
Age:			
Length of hair:	Long	Medium	Short
Color:			
Dog's Name			

Rabies vaccination must be valid through November 1st of the current year

PROOF of current rabies vaccination is required if not already on file. **PROOF** of spaying/neutering is required if not already on file.

_____ I no longer have my dog.

_____ My dog passed away during the past year.

Date Rabies Expires