

Township of Weehawken
New Jersey

Board of Health
372 Park Avenue
Weehawken, New Jersey 07086
201-319-6054
Fax: 201-863-7989

Dog License Application

Instructions:

1. Complete the application below for your dog license. A separate application is needed for each dog.
2. Proof of rabies vaccination must be submitted with each license application. All certificates received will be returned with the issued license.
3. Proof of spaying or neutering is required for all new licenses.
4. Enclose a check or money order with the correct amount due.
Spayed/Neutered: \$9.00 Non Spayed/Non Neutered \$12.00
5. Mail to: Weehawken Health Department
372 Park Avenue
Weehawken, New Jersey 07086

Thank you for your time and cooperation in this matter.

2016 N.J. DOG LICENSE

Township of Weehawken Hudson County

This license to own, keep or harbor the dog described below is issued to:

Name: _____ Date: _____

Address: _____ Telephone: _____

Dog: Sex M F Breed: _____ Age: _____ Hair S M L
(circle one) (circle one)

Color & Markings: _____ Name: _____

Address at which dog will be kept if different from above: _____

Rabies Inoculation (Compulsory) Date Expires: _____ No. _____ Neutered Spayed

THIS LICENSE EXPIRES JANUARY 31, 2017 AND IS SUBJECT TO RENEWAL DURING JANUARY, 2016

Neutered/Spayed

Non Neutered/Non Spayed



Always be a responsible pet owner and clean up after your dog.