



BOROUGH OF CHESTER HEALTH DEPARTMENT  
50 NORTH ROAD, CHESTER NJ 07930  
908-879-3660 X2128

APPLICATION FOR 2018 DOG LICENSE

**IF YOU HAVE NOT ALREADY DONE SO, YOU MUST SUBMIT PROOF THAT YOUR DOG HAS A CURRENT RABIES' VACCINATION, WHICH MUST BE VALID UNTIL AT LEAST OCTOBER 31, 2018.**

**DOG INFORMATION**

NAME OF DOG:	SPAYED/NEUTERED:
AGE:	BREED:
SEX:	COLOR:
VETERINARIAN:	RABIES EXPIRATION DATE:
VET TELEPHONE #:	HAIR LENGTH:

**OWNER INFORMATION**

LAST NAME: I	FIRST NAME:
STREET ADDRESS:	PO BOX/APT #:
CITY/STATE:	ZIP CODE:
HOME PHONE:	CELL PHONE:

**FEE SCHEDULE**

**\$15.00 SPAYED/NEUTER**

**\$18.00 NOT SPAYED/NEUTERED**

**LATE FEE: \$2.00 PER MONTH AFTER JANUARY 31, 2017**