

BOROUGH OF CHESTER HEALTH DEPARTMENT
50 NORTH ROAD, CHESTER NJ 07930
908-879-3660 ext. 2128
APPLICATION FOR 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 31st.

DOG INFORMATION

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

OWNER INFORMATION

LAST NAME:	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 31st.