Borough of Fort Lee

Department of Health
309 Main Street (Located in the rear parking lot)
Fort Lee, New Jersey 07024-4799
(201) 592-3500, ext. 1510
Fax (201) 585-1901
Email: health@fortleenj.org

Pet License Application

New_____ Renewal_____

Owner Information:

Name: _____

Address: _____

Home Phone: _____ Cell: _____

Email: _____

Dog_____ Cat_____

Name: _____ Breed: _____ Age: _____

Coat Length (**Long** / **Medium** / **Short**) Color: _____

Microchip Number (if applicable): _____

Proof of current rabies vaccination must be submitted to Health Department.

Dog Owners Please Note:

Pursuant to N.J.A.C. 8:23A-4.2, to obtain a dog license the owner must supply to the licensing clerk a rabies vaccination certificate signed by a licensed veterinarian indicating that the animal's duration of immunity extends throughout the first ten months of the twelve-month licensing period (January 1 – October 31). *Dogs that have a duration of immunity which expires prior to the ten-month cut-off must receive a booster rabies vaccination prior to licensure. Boostering an animal before expiration of the previous vaccine has not been associated with an increased occurrence of adverse reactions and is not medically contraindicated.*

Vaccine Type (1 or 3 year): _____ Expiration Date: _____

Name of Veterinarian: _____ Phone Number: _____

***Dog License fee: $10 if neutered/spayed. $13 if not neutered/spayed.**
***Cat License fee: $4 if neutered/spayed. $7 if not neutered/spayed.**
Neutered/spayed documentation must be submitted to Health Department if not previously provided.

Please make checks payable to Fort Lee Health Department.