



West Windsor Township



Public Health
Prevent. Promote. Protect.

DOG LICENSE

NEW OWNER OR NEW RESIDENT

West Windsor Township Ordinance requires that all dogs over 7 months of age be licensed. The fee for this license is **\$10.00** for a neutered dog and **\$13.00** for a non-neutered dog. Renewal of dog licenses are completed every January.

Dog licenses issued after January 31st are charged a **\$2.00** late fee per month for every month the license is not renewed. The late fee does not apply to new pets. Licensing is required for all dogs, including indoor-only dogs. [How much do I owe?](#)

Please Note: **Separate checks are required for each pet licenses.** Simply complete the below registration form and return it with the appropriate fee and required attachments.

License registration and payment may be submitted (cash or check only):

West Windsor Township, Health Department
271 Clarksville Road West Windsor, NJ 08550

Contact Information:

Phone Number: (609)936-8400
health@westwindsortwp.com
www.westwindsornj.org

Dog License Registration Form

Pet Owner's Name: (First Name) _____ (Last Name) _____

Address: _____ City & Zip Code: _____

Phone Number: _____ Emergency Number: _____

Email: _____

Dog's Name: _____ Sex: M F Dog's Birthday ____/____/____ Age: ____

Hair: Long Medium Short Breed: _____

Color/Markings: _____ Rabies Expiration date: ____/____/____

Veterinarian: _____

1. **Important Note:** Rabies Vaccination must be **valid through November 1st** of the licensing year for each dog being licensed {Remember to Enclose Proof}

2. Spayed / Neutered: Yes No Date: ____/____/____

Please Enclose Proof, if your dog was Spayed / Neutered or Sign Below

Signature: _____ Date: ____/____/____

Check this box & circle one, if applicable: Service Animal / Seeing Eye / Hearing Ear

***By signing this document below, you have read, understood, and agree to the terms and conditions of this application. ***

Signature: _____ Date: ____/____/____