



DOG LICENSE MAIL IN FORM

**City of Union City
3715 Palisade Ave.
Union City, New Jersey 07087
Attn: Pet Licensing**

PLEASE MAIL IN THE FOLLOWING FORM, WITH PROOF OF RABIES
VACCINATION FOR YOUR DOG AND THE APPROPRIATE FEE TO: City Clerk's
Office

DOG LICENSE APPLICATION – CITY OF UNION CITY

Owner's Name: _____ Date: _____

Address: _____ Telephone: _____

Dog: Sex: _____ Breed: _____ Age: _____

Hair Color: _____ Hair Length: Short: Medium: Long:

Dog's/Cat's Name: _____

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

Spayed/Neutered (Check One): Yes: ___ No: ___ Date:

Rabies Vaccination Expires (Please include Proof)

BREAKDOWN ON FEES

	Spayed/Neutered	Non Spayed/Non Neutered
License Fee	\$10.80	\$10.80
Registration Fee	\$1.00	\$1.00
N.J. Pilot Clinic Fund N.J.	\$0.20	\$0.20
Pet Population Control	\$0.00	\$3.00
TOTAL	\$12.00	\$15.00