

Borough of Fort Lee

Mayor
MARK J. SOKOLICH

Borough Administrator
ALFRED R. RESTAINO

Health Officer
JILL SCARPA



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

Council
JOSEPH L. CERVIERI, JR.
ILA KASOFSKY
MICHAEL SARGENTI
HARVEY SOHMER
PETER J. SUH
PAUL K. YOON

Owner Information

Name: _____

Address: _____

Home Phone: _____ Cellphone: _____

Email: _____

Dog Information

Name: _____ Breed: _____ Age: _____

Sex (Circle One): Male Female

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

Microchip Number (if applicable): _____

Neutered or Spayed? (circle one): Yes No

Rabies Vaccine Information

Pursuant to N.J.A.C. 8:23A-4.2, in order to issue a dog license, the pet owner must supply to the dog 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 (Jan. 1 – Nov. 1). Animals 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: _____

Veterinarian's Phone Number: _____

License fee: \$10 if neutered/spayed. \$13 if not neutered/spayed. Fees are payable by check.

Checks can be made out to Fort Lee Health Department.