

PA Department of Agriculture, Bureau of Dog Law Enforcement

DOG LICENSE APPLICATION

Year of license \_\_\_\_\_

License # \_\_\_\_\_

|   |                                     |                                   |   |                                   |  |
|---|-------------------------------------|-----------------------------------|---|-----------------------------------|--|
| DATE  | DOG'S NAME                          | DOG'S AGE                         | BREED   |                                   |  |
| COLOR OF DOG:   | SPOTTED<br><input type="checkbox"/> | WHITE<br><input type="checkbox"/> | BLACK<br><input type="checkbox"/>   | BROWN<br><input type="checkbox"/> | OTHER-INDICATE<br><input type="checkbox"/> |
| If the license is issued by an agent rather than the COUNTY TREASURER, an additional 50¢ will be charged.<br>ALL PRICES INCLUDE SERVICE FEES ALLOWED BY LAW.  |                                     |                                   |   |                                   |  |
| REGULAR FEE   |                                     |                                   | PERSON WITH DISABILITY OR SENIOR CITIZEN FEE  |                                   |  |
| <div>MALE<br/>\$8.70<br/><input type="checkbox"/></div> <div>FEMALE<br/>\$8.70<br/><input type="checkbox"/></div>   |                                     |                                   | <div>MALE<br/>\$6.70<br/><input type="checkbox"/></div> <div>FEMALE<br/>\$6.70<br/><input type="checkbox"/></div> |                                   |  |
| PLEASE NOTE: IF YOU ARE APPLYING FOR A LICENSE THAT REQUIRES THE DOG OWNER BE A SENIOR CITIZEN, AGE 65 OR OLDER, OR A PERSON WITH DISABILITY, YOU MUST PROVIDE PROOF OF AGE OR DISABILITY TO THE COUNTY TREASURER OR AGENT. |                                     |                                   |   |                                   |  |
| OWNER'S NAME  |                                     | TELEPHONE NO.                     | OWNER'S DATE OF BIRTH   |                                   |  |
|   |                                     |                                   | MO.   | DAY                               | YR.  |
| STREET  |                                     | TOWNSHIP/BOROUGH                  |   |                                   |  |
| CITY  |                                     | STATE                             | ZIP CODE  |                                   |  |
|   |                                     | PA                                |   |                                   |  |
| E-MAIL ADDRESS  |                                     |                                   |   |                                   |  |

I HEREBY VERIFY THAT I AM THE OWNER OF THE DOG THAT IS THE SUBJECT OF THIS DOG LICENSE APPLICATION. I MAKE THIS STATEMENT SUBJECT TO THE CRIMINAL PENALTIES OF 18 Pa § SECTION 4904 (RELATING TO UNSWORN FALSIFICATION TO AUTHORITIES).

SIGNATURE OF DOG OWNER/APPLICANT REQUIRED

IF APPLICANT IS A MINOR, SIGNATURE OF PARENT OR GUARDIAN IS REQUIRED

MAIL TO COUNTY TREASURER'S OFFICE