

# Dog License Application      Year of Licensure \_\_\_\_\_

Date _____ Dog's Name _____ Dog's Age _____ Breed _____			
Color of Dog: <input type="checkbox"/> Spotted <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Brown <input type="checkbox"/> Other – Indicate _____			
REGULAR:		PERSON WITH DISABILITY OR SENIOR CITIZEN FEE:	
Male    Neutered Male    Female    Spayed Female	Male    Neutered Male    Female    Spayed Female	Male    Neutered Male    Female    Spayed Female	Male    Neutered Male    Female    Spayed Female
\$8.00    \$6.00    \$8.00    \$6.00	\$6.00    \$4.00    \$6.00    \$4.00	\$6.00    \$4.00    \$6.00    \$4.00	\$6.00    \$4.00    \$6.00    \$4.00
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
*Above price includes one dollar service fee allowed by law		*Above price includes one dollar service fee allowed by law	
<p><b>If the license is issued by an agent of the COUNTY TREASURER, an additional .50 cents will be charged</b></p> <p><i>PLEASE NOTE: IF YOU ARE APPLYING FOR A LICENSE THAT REQUIRES THE DOG OWNER TO BE A SENIOR CITIZEN OR A PERSON WITH DISABILITY, YOU MUST PROVIDE PROOF OF AGE OR DISABILITY TO THE COUNTY TREASURER OR AGENT.</i></p>			
Owner's Name:		Phone Number:	Owner's Birth Date (MO/DAY/YEAR)
Street or R.D. No.		Township/Borough	
City	State	Zip Code	
	<b>PA</b>		

IF YOU'RE APPLYING FOR A LICENSE THAT REQUIRES YOUR DOG TO BE SPAYED OR NEUTERED, YOU MUST EITHER SUBMIT VERIFICATION FROM A LICENSED DOCTOR OF VETERINARY MEDICINE OR SIGN THE FOLLOWING AFFIDAVIT:

IF SENIOR CITIZEN, OR PERSON WITH DISABILITY, APPLICATION MUST BE SIGNED BY THE DOG OWNER.

I HEREBY CERTIFY THAT I AM THE OWNER OF THE DOG THAT IS THE SUBJECT OF THIS DOG LICENSE APPLICATION, THAT THE DOG HAS BEEN SPAYED OR NEUTERED AND THAT I MAKE THIS STATEMENT SUBJECT TO THE CRIMINAL PENALTIES OF 18 Pa. C.S. § SECTION 4904 (RELATING TO UNSWORN FALSIFICATION TO AUTHORITIES).

MAIL TO COUNTY  
TREASURER'S OFFICE

\_\_\_\_\_  
Dog Owner/ Applicant