

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 <input type="checkbox"/>	WHITE <input type="checkbox"/>	BLACK <input type="checkbox"/>	BROWN <input type="checkbox"/>	OTHER-INDICATE <input type="checkbox"/>		
If the license is issued by an agent rather than the COUNTY TREASURER, an additional 50¢ will be charged. ALL PRICES INCLUDE SERVICE FEES ALLOWED BY LAW.								
REGULAR FEE				PERSON WITH DISABILITY OR SENIOR CITIZEN FEE				
MALE	NEUTERED MALE	FEMALE	SPAYED FEMALE	MALE	NEUTERED MALE	FEMALE	SPAYED FEMALE	
<b>\$8.50</b>	<b>\$6.50</b>	<b>\$8.50</b>	<b>\$6.50</b>	<b>\$6.50</b>	<b>\$4.50</b>	<b>\$6.50</b>	<b>\$4.50</b>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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		
				<b>PA</b>				
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).

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 SIGNATURE OF DOG OWNER/APPLICANT REQUIRED
 

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

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MAIL TO COUNTY TREASURER'S OFFICE