

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 \$10.80 <input type="checkbox"/>	FEMALE \$10.80 <input type="checkbox"/>	MALE \$8.80 <input type="checkbox"/>	FEMALE \$8.80 <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
STREET		TOWNSHIP/BOROUGH			
CITY				STATE	ZIP CODE
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

MAKE CHECKS PAYABLE TO COUNTY TREASURER

MAIL TO COUNTY TREASURER'S OFFICE