

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 _____
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
\$8.50	\$6.50	\$8.50	\$6.50
—		—	—
MALE	NEUTERED MALE	FEMALE	SPAYED FEMALE
\$6.50	\$4.50	\$6.50	\$4.50
PLEASE NOTE: IF YOU ARE APPLYING FOR A LICENSE THAT REQUIRES THE DOG OWNER BE A SENIOR CITIZEN, AGE 65 AND 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 OR R.D. NO.		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

Room 201
 1 Courthouse Square
 Carlisle, PA 17013-3322