

PA Department of Agriculture, Bureau of Dog Law Enforcement

LIFETIME DOG LICENSE APPLICATION

Year of license _____

A Permanent Identification Verification Form must be completed before the license will be issued.

| | | | | |
|------------------|--|-------------------|--------------------|--------------|
| DOG OWNER'S NAME | | OWNER'S BIRTHDATE | | PHONE NUMBER |
| | | MO. | DAY | |
| STREET ADDRESS | | | TOWNSHIP/BOROUGH | |
| CITY | | | STATE PA | ZIP CODE |

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|----------------------------------|--------------------------------|--------------------------------|--------------------------------|---|--------|--|------|------|--------|--------|--|----------------|----------------|----------------|----------------|--|--------------------------|--------------------------|--------------------------|--------------------------|--|--|--|--|--|----------|--|--------|--|------|------|--------|--------|--|----------------|----------------|----------------|----------------|--|--------------------------|--------------------------|--------------------------|--------------------------|--|
| DATE | BREED | DOG'S AGE | DOG'S NAME | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| COLOR / MARKINGS | SPOTTED <input type="checkbox"/> | WHITE <input type="checkbox"/> | BLACK <input type="checkbox"/> | BROWN <input type="checkbox"/> | OTHER-INDICATE <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p align="center">REGULAR LIFETIME LICENSE</p> <table border="0"> <tr> <td></td> <td>NEUTERED</td> <td></td> <td>SPAYED</td> <td></td> </tr> <tr> <td>MALE</td> <td>MALE</td> <td>FEMALE</td> <td>FEMALE</td> <td></td> </tr> <tr> <td>\$51.50</td> <td>\$31.50</td> <td>\$51.50</td> <td>\$31.50</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> </tr> </table> <p align="center">ALL PRICES INCLUDE SERVICE FEES ALLOWED BY LAW</p> | | | | NEUTERED | | SPAYED | | MALE | MALE | FEMALE | FEMALE | | \$51.50 | \$31.50 | \$51.50 | \$31.50 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | <p align="center">PERSON WITH DISABILITY OR SENIOR CITIZEN FEE</p> <table border="0"> <tr> <td></td> <td>NEUTERED</td> <td></td> <td>SPAYED</td> <td></td> </tr> <tr> <td>MALE</td> <td>MALE</td> <td>FEMALE</td> <td>FEMALE</td> <td></td> </tr> <tr> <td>\$31.50</td> <td>\$21.50</td> <td>\$31.50</td> <td>\$21.50</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> </tr> </table> <p align="center">ALL PRICES INCLUDE SERVICE FEES ALLOWED BY LAW</p> | | | | NEUTERED | | SPAYED | | MALE | MALE | FEMALE | FEMALE | | \$31.50 | \$21.50 | \$31.50 | \$21.50 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | NEUTERED | | SPAYED | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MALE | MALE | FEMALE | FEMALE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \$51.50 | \$31.50 | \$51.50 | \$31.50 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | NEUTERED | | SPAYED | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MALE | MALE | FEMALE | FEMALE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \$31.50 | \$21.50 | \$31.50 | \$21.50 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>PLEASE NOTE: If you are applying for a lifetime 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.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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**