PA Department of Agriculture, Bureau of Dog Law Enforcement

DOG LICENSE APPLICATION

Year of license					License #					
DATE	DOG'S NAME	DOG'S NAME			DOG'S AGE			BREED		
COLOR OF DOG:	SPOTTED	BLACK	CK BROWN			OTHER-INDICATE				
If the license i	is issued by an ag ALL PF	ent rather than the GICES INCLUDE SE	COUNTY T	REAS	URER, an a	dditic	nal 5	0¢ will be	charged.	
REGULAR FEE PERSON WITH DISABILITY OR SENIOR CI									TIZEN FEE	
MALE	MALE FEMALE			MALE			FEMALE			
\$10.80)	\$10.80		\$8.80		\$8.80				
PROOF OF AG	IZEN, AGE 65 O SE OR DISABILI	PPLYING FOR A R OLDER, OR A I TY TO THE COUN	PERSON	WITH	DISABILIT	TV V	OLL	OG OWN	NER BE ROVIDE	
OWNER'S NAME			TELEPH	ELEPHONE NO.		OWNER'S DATE OF BIRTH				
						M		DAY	YR.	
STREET				TOV	VNSHIP/BOF	ROUG	H			
CITY					STATE PA		ZIP CODE			
E-MAIL ADDRES	ss									
APPLICATION. I I	MAKE THIS STATE	OWNER OF THE DO MENT SUBJECT TO CATION TO AUTHO	THE CRI	S THE	SUBJECT O PENALTIES	F THI S OF 1	S DO	G LICENS § SECTIO	SE N 4904	
	SIGNATUI	RE OF DOG OW	NER/APF	PLICA	NT REQU	JIRE	D			
IF APPLIC	CANT IS A MINO	DR, SIGNATURE	OF PAR	ENT	OR GUAR	DIAI	N IS	REQUIR	RED	

MAKE CHECKS PAYABLE TO COUNTY TREASURER

MAIL TO COUNTY TREASURER'S OFFICE

ADLEB 19 rev. 9/2025

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				OWNE	R'S BIRT	HDATE	PHONE	PHONE NUMBER		
				MO.	DAY	YR.				
E-MAIL ADDRESS			_							
STREET ADDRESS	S				TC	OWNSH	IP/BOROUG	H		
CITY		-				S	тате РА	ZIP CODE		
DATE	BREED		DOG'S	S AGE	AGE DOG'S NA			AME		
COLOR / MARKINGS	SPOTTED	WHITE	BL	ACK	BF	ROWN	OTHE	R-INDICATE		
REGULAR LIFETIME LICENSE				PERSON WITH DISABILITY OR SENIOR CITIZEN FEE						
MALE		FEMALE		MALE				FEMALE		
\$52.80		\$52.80		\$36.80			\$36.80			
ALL PRICES INCLUDE SERVICE FEES ALLOWED BY LAW				ALL PRICES INCLUDE SERVICE FEES ALLOWED BY LAW						
PLEASE NOTE: If y older) or a person								nior citizen (age 65 o Treasurer.		
I HEREBY VERIFY APPLICATION. I M. (RELATING TO UN	AKE THIS STAT	EMENT SUBJE	стто	THE C	RIMINAL			OOG LICENSE Pa § SECTION 4904		
	SIGNATU	RE OF DOG	OWN	ER/A	PPLICA	NT R	EQUIRED			

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

MAKE CHECKS PAYABLE TO COUNTY TREASURER
MAIL TO COUNTY TREASURER'S OFFICE