

License# _____ **DOG LICENSE APPLICATION** Year of license _____

DATE _____ DOG'S NAME _____ DOG'S AGE _____ BREED _____

ALL PRICES INCLUDE SERVICE FEE ALLOWED BY LAW.
ALLEGHENY COUNTY RESIDENTS ONLY—CITY OF PITTSBURGH NOT ELIGIBLE

REGULAR FEE **PERSON WITH DISABILITY OR SENIOR CITIZEN FEE**

MALE-\$8.45 <input type="checkbox"/>	FEMALE-\$8.45 <input type="checkbox"/>	MALE-6.45 <input type="checkbox"/>	FEMALE - 6.45 <input type="checkbox"/>
MALE NEUTERED-\$6.45 <input type="checkbox"/>	FEMALE SPAYED-\$6.45 <input type="checkbox"/>	MALE NEUTERED-4.45 <input type="checkbox"/>	FEMALE SPAYED-\$4.45 <input type="checkbox"/>

COLOR OF DOG: SPOTTED WHITE BLACK BROWN OTHER-INDICATE

PLEASE NOTE: IF YOU ARE APPLYING FOR A LICENSE THAT REQUIRES THE DOG OWNER TO 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.

OWNERS NAME _____ TELEPHONE NO. () _____ OWNERS BIRTH DATE _____
 MO. DAY YR.

STREET OR R.D. NO. _____ TOWNSHIP/BOROUGH _____ STATE _____ ZIP CODE _____
 CITY _____ PA

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
 MAIL TO COUNTY TREASURERS OFFICE