DOG LICENSE APPLICATION

DATE		DOG'S NAM	E		[OOG'S AGE	BREED		
	SPOTTED	WHITE	BLACI	C BRO	DWN	OTHER - INC	ICATE		
COLOR OF DOG]				
REGULAR				PERSON WITH DISABILITY OR SENIOR CITIZEN FEE					
MALE \$8.00 ABOVE PRICE			SPAYED FEMALE \$6.00	MALE \$6.00		E FEN		SPAYEI FEMAL \$4.00	E)
If the license is issued by an agent of the COUNTY TREASURER, an additional .50¢ will be charged.									
PLEASE NOTE: IF YOU ARE APPLYING FOR A LICENSE THAT REQUIRES THE DOG OWNER BE A SENIOR CITIZEN OR A PERSON WITH DISABILITY, YOU MUST PROVIDE PROOF OF AGE OR DISABILITY TO THE COUNTY TREASURER OR AGENT.									
OWNER'S NAME			Tot	IONE NUMBER			OWNERS	BIRTHDA	TE
OWNER S NAME			~	TONE NUMBER	•				R.
STREET OR R.D. NO.				TOWNSHIP/BOROUGH					
CITY						STATE	ZIP CO	DE	
						PA			

IF YOU ARE APPLYING FOR A LICENSE THAT REQUIRES YOUR DOG TO BE SPAYED OR NEUTERED, YOU MUST ETHER SUBMIT WRITTEN STAMPED ENVELOPE WHEN MAILING. IF VERIFICATION FROM A LICENSED DOCTOR OF VETERINARY MEDICINE SENIOR CITIZEN OR PERSON WITH OR SIGN THE FOLLOWING AFFIDAVIT:

OR SIGN THE FOLLOWING AFFIDAVIT:

I HEREBY VERIFY THAT I AM THE OWNER OF THE DOG THAT IS THE SIGNED BY THE DOG OWNER.

SUBJECT OF THIS DOG LICENSE APPLICATION, THAT THE DOG HAS BEEN SPAYED OR NEUTERED AND THAT I MAKE THIS STATEMENT SUBJECT TO THE CRIMINAL PENALTIES OF 18 Pa. C.S. § SECTION 4904 (RELATING TO UNSWORN FALSIFICATION TO AUTHORITIES).