

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 <input type="checkbox"/>	WHITE <input type="checkbox"/>	BLACK <input type="checkbox"/>
		BROWN <input type="checkbox"/>	OTHER-INDICATE <input type="checkbox"/>
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 .			
OWNER'S NAME		TELEPHONE NO. ()	OWNER'S BIRTH DATE
			MO. DAY YR.
STREET OR R.D. NO.		TOWNSHIP/BOROUGH	
CITY		STATE PA	ZIP CODE
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 TREASURER'S OFFICE			