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|--|--|--|--|--------------------------------|---|
| License# _____   | <b>DOG LICENSE APPLICATION</b>                   |  |  | Year of license _____          |   |
| DATE   | DOG'S NAME                                       | DOG'S AGE                                      | BREED  |                                |   |
| ALL PRICES INCLUDE SERVICE FEE ALLOWED BY LAW.<br><b>ALLEGHENY COUNTY RESIDENTS ONLY—CITY OF PITTSBURGH NOT ELIGIBLE</b>   |  |  |  |                                |   |
| 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<br>NEUTERED-\$6.45 <input type="checkbox"/>   | FEMALE<br>SPAYED-\$6.45 <input type="checkbox"/> | MALE<br>NEUTERED-4.45 <input type="checkbox"/> | FEMALE<br>SPAYED-\$4.45 <input type="checkbox"/> |                                |   |
| COLOR<br>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 <b>COUNTY TREASURER</b> .            |  |  |  |                                |   |
| OWNER'S NAME   |  | TELEPHONE NO.<br>(    )                        | OWNER'S BIRTH DATE                               |                                |   |
|  |  |  | MO.  | DAY    YR.                     |   |
| STREET OR R.D. NO.   |  | TOWNSHIP/BOROUGH                               |  |                                |   |
| CITY   |  | STATE<br><b>PA</b>                             | 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). |  |  |  |                                |   |
| _____<br>SIGNATURE OF DOG OWNER/APPLICANT REQUIRED<br>MAIL TO COUNTY TREASURER'S OFFICE  |  |  |  |                                |   |