

ADLEB - VOM/TF (Rev. 10/2023)



**BUREAU OF DOG LAW ENFORCEMENT
PENNSYLVANIA DEPARTMENT OF AGRICULTURE
PERMANENT IDENTIFICATION
VERIFICATION FORM**

MICROCHIP # _____ or TATTOO # _____
MUST BE COMPLETED BY PERSON IMPLANTING OR SCANNING MICROCHIP MUST BE COMPLETED BY COUNTY TREASURER PRIOR TO TATTOOING

DOG'S NAME _____ MALE FEMALE
DOG'S BREED _____ DOG'S AGE _____ DOG'S SEX

SPOTTED WHITE BLACK BROWN OTHER-INDICATE
DOG'S COLOR/MARKINGS _____

OWNER'S NAME		STREET	
CITY	STATE PA	ZIP	TELEPHONE NO.
TOWNSHIP		COUNTY	

NAME OF PERSON <small>circle one MICROCHIP-IMPLANTING or SCANNING or TATTOOING</small>		VETERINARIAN PRACTICE # (TATTOO or MICROCHIP) BV	
STREET		PA KENNEL LICENSE # (MICROCHIP)	
COUNTY	CITY	STATE	ZIP
TELEPHONE NO.			

I MAKE THIS STATEMENT SUBJECT TO THE CRIMINAL PENALTIES OF
18 Pa. C.S. § SECTION 4904 (RELATING TO UNSWORN FALSIFICATION TO AUTHORITIES).

SIGNATURE OF PERSON IMPLANTING/SCANNING MICROCHIP/TATTOOING DATE

SIGNATURE OF DOG OWNER DATE

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	OWNER'S BIRTHDATE		PHONE NUMBER
	MO.	DAY	
E-MAIL ADDRESS			
STREET ADDRESS		TOWNSHIP/BOROUGH	
CITY		STATE PA	ZIP CODE

DATE	BREED	DOG'S AGE	DOG'S NAME	
COLOR / MARKINGS	SPOTTED <input type="checkbox"/>	WHITE <input type="checkbox"/>	BLACK <input type="checkbox"/>	BROWN <input type="checkbox"/> OTHER-INDICATE <input type="checkbox"/>
REGULAR LIFETIME LICENSE		PERSON WITH DISABILITY OR SENIOR CITIZEN FEE		
MALE	FEMALE	MALE	FEMALE	
\$52.80	\$52.80	\$36.80	\$36.80	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ALL PRICES INCLUDE SERVICE FEES ALLOWED BY LAW		ALL PRICES INCLUDE SERVICE FEES ALLOWED BY LAW		
PLEASE NOTE: If you are applying for a lifetime license that requires the dog owner 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 .				

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

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

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