



DIANE R. MARBURGER BUTLER COUNTY TREASURER

PO BOX 1208
124 WEST DIAMOND STREET
BUTLER, PA 16003
www.butlercountypa.gov

OFFICE HOURS
8:30 AM - 4:15 PM
Weekdays
(724) 284-5149

UNLICENSED DOGS SUBJECT TO FINES UP TO \$500 PER DOG.

NEW IN 2024

FOUR CONVENIENT OPTIONS TO PURCHASE A DOG LICENSE

1. ONLINE using your digital device

- www.doglicenses.us/PA/Butler/
- Prefilled applications available when you use your Renewal ID and Online Code
- Orders will be processed and delivered within 5-7 days



Renewal ID:

Online Code:

2. TELEPHONE

- Call 724-284-5149 to order your dog license
- Have your credit card information on hand
- Convenience fee applies
- Orders will be processed and delivered within 5-7 days

3. MAIL

- Complete the application below include a check or money order payable to: **Butler County Treasurer**
- Mail to: Butler County Treasurer P.O. Box 1208, Butler, PA 16003-1208
- Orders will be processed and delivered within 2-4 weeks

4. IN PERSON

- Licenses can be purchased at the Butler County Treasurer's Office located at 124 West Diamond Street, Butler, PA 16001 between the hours of 8:30AM and 4:15PM
- Accepting cash, check, money order, credit and debit cards

REGULAR				SENIOR CITIZEN AGED 65 OR PERSON WITH DISABILITY			
MALE		FEMALE		MALE		FEMALE	
\$8.70		\$8.70		\$6.70		\$6.70	

-----Detach and Return Application with Payment-----

PLEASE ALLOW 2-4 WEEKS FOR PROCESSING

MAIL ORDERS

DIANE R. MARBURGER, COUNTY TREASURER
PO BOX 1208, BUTLER, PA 16003-1208

APPLICATION for the registration of dog(s)

Spayed / Neutered	Age		Sex (M/F)	Color									Breed	Name	Fee Paid (See Above)	No Longer Owned	--- Office Use --- 2024 License #
	YRs	MOs		BL	WH	GR	BD	TA	BR	YE	RE	TRI					

Color Codes: BL=Black; WH=White; GR=Gray; BD=Brindle;
TA=Tan; BR=Brown; YE=Yellow; RE=Red; TRI=Tri-Color
Owner Information

Name: _____

Street Address: _____

Mailing Address: _____
if different (e.g. P.O. Box)

City: _____ State: _____ ZipCode: _____

I hereby verify that I am the owner of the dog(s) that are 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).

The undersigned says that the facts indicated above ARE TRUE.

Signature of Applicant _____

Phone # _____ Email Req'd _____

For Senior Citizen Discount: Owner's Date of Birth _____ / _____ / _____

For Person with Disability Discount, check: ☐