MEREDITH L. SCHREFFLER
CHIEF DEPUTY

AMANDA RUNKLE
2ND DEPUTY &

JEFFERY BELLOMO, ESQ

TAX ACCOUNT MANAGER

SOLICITOR

COUNTY OF YORK

Barbara L. Bair
TREASURER



(717) 771-9603 TELEPHONE (717) 771-4331 FAX

www.YorkCountyPA.gov Web Site

Treasurer@ YorkCountyPA.gov

LIFETIME DOG LICENSE – INFORMATION SHEET

Online Purchase

You have purchased a lifetime dog license on the York County Dog License Website. All lifetime licenses require the dog to be micro-chipped or tattooed. Questions regarding this procedure should be directed to the Dog License Coordinator, at 717-771-4386 or e-mailed to: Treasurer@yorkcountypa.gov.

STEP 1

Have your Dog implanted with a micro-chip identification system under the skin by a licensed veterinarian. The veterinarian will complete the attached Permanent Identification Verification Form (PIVForm) including their veterinarian practice number.

If your dog has already been micro-chipped, you will need to take your dog to the York County SPCA or your vet to be scanned. They will complete the PIVForm.

Or

If you plan to have your dog tattooed. Please contact the Treasurer's office for the <u>assigned number.</u>

STEP 2
LICENSE

Dog Owner mails the PIVF form to the County Treasurer's Office. (If your dog is spayed or neutered, enclose a copy of the certification documents with the PIVF form.)

Send to: York County Treasurer Lifetime Dog License

28 East Market Street Room 126

York, PA 17401-1584

STEP 3

The **County Treasurer** issues you a **PERMANENT LICENSE** and a stainless steel **Collar ID TAG** for your dog.

By state law, your dog is <u>not legally licensed</u> until the completed PIVF is received by the County Treasurer. This procedure <u>MUST</u> be completed <u>within 30 days from the date issued</u> by the Treasurer's office.

Dog License rev. 06-20



DOG LAW ENFORCEMENT OFFICE PENNSYLVANIA DEPARTMENT OF AGRICULTURE

PERMANENT IDENTIFICATION VERIFICATION FORM

YEKII ICATION I OKW						
MICROCHIP#				ATTOO #		
					EUTERED SPAYED MALE FEMALE FEMALE	
DOG'S BREED DOB			_ DOG'S SEX			
DOG'S COLOR	SPOTTED V	WHITE BLACK	BROW	VN OTHER-	INDICATE	
OWNER'S NAM	IE	STREET				
CITY			STATE PA	ZIP	TELEPHONE NO.	
TOWNSHIP COUNTY						
NAME OF PERSON circle one MICROCHIP-IMPLANTING or SCANNING OF TATTOOING VETERINARIAN PRACTICE # (TATTOO OF 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			
FORM MUST BE RETURNED TO COUNTY TREASURER WITHIN 30 DAYS OF RECEIPT Form is VOID if not returned to Treasurer on or before date listed.						