



**AMANDA C. HILES**  
**ARMSTRONG COUNTY TREASURER**  
 450 E. MARKET STREET, SUITE 100  
 KITTANNING, PA 16201

COUNTER HOURS  
 8:00 AM - 4:00 PM  
 Weekdays  
 (724) 548-3260

**RENEWAL REMINDER**

**No longer own a dog?**

If you no longer own a dog listed below and are not renewing/purchasing any current year licenses, please email or call Treasurer's office to have removed to prevent future reminders.  
**treasdept@co.armstrong.pa.us**

**ON-LINE**

Register your dog(s) on-line at <https://www.doglicenses.us/PA/Armstrong>. A convenience fee for credit card payments will be applied per license purchase online. Please see the website for details. To access your pre-filled form you will need the Renewal ID and Password listed below.

Account ID: \_\_\_\_\_ Password: \_\_\_\_\_

**BY MAIL**

1. Complete this form. Be sure the owner, street address, and pet description(s) are correct.
2. Use this form to register 1 to 5 dogs. Please list any additional dogs on a separate sheet of paper and return it with this form. Pennsylvania law requires a license for every dog 3 months of age or older.
3. Enclose a check or money order for the correct fees payable to: **Armstrong County Treasurer**. Please do not send cash. All 2024 dog licenses expired on December 31st. The maximum fine for an unlicensed dog is \$500.
4. Please return the application along with check or money order. Your 2025 license tag(s) will be mailed to you.

**IN PERSON**

Armstrong Co Treasurer's Office, 450 E. Market St, Ste 100, Kittanning, PA 16201.

Tags are available at these locations also. A **50 cent fee** is added for tags purchased at an agent other than the Treasurer's Office.

- \*\* Apollo Library, 219 North Penn Ave, Apollo
- \*\* Shannock Ace Hardware, 634 Main Street, Rural Valley

REGULAR FEE	SENIOR CITIZEN OR PERSON WITH DISABILITY FEE
MALE / FEMALE \$8.70	MALE / FEMALE \$6.70

**PLEASE NOTE: IF APPLYING FOR A SENIOR CITIZEN LICENSE, THE OWNER MUST CURRENTLY BE AGE 65 AND OLDER. A PERSON WITH A DISABILITY MUST PROVIDE PROOF OF DISABILITY TO THE COUNTY TREASURER OR AGENT.**

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

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

AMANDA C. HILES, COUNTY TREASURER  
 450 E. Market Street, Suite 100; Kittanning, PA 16201

APPLICATION for the registration of dog(s) for the year 2025

Age		Sex (M/F)	Color										Breed	Name	Fee Paid (See Above)	No Longer Owned	--- Office Use ---		
YRs	MOs		BL	WH	GR	BD	TA	BR	YE	RE	TRI	2025 License #							

**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 \_\_\_\_\_

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

For Person with Disability Discount, check:  (Affidavit Req'd)