

County of Union

Diane K Reigle

Treasurer

Chief Deputy
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Senior Deputy/Tax Collector
Glenda Radel

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Affidavit for Dog License

(PERSON WITH A DISABILITY)

Dog License Number _____

I hereby certify that I am the owner of the dog that is the subject of this dog license application. I further certify that I am a "perosn with disability" as that term is defined in Section 102 of the Pennsylvania Dog Law (P.L.784 No. 225 as amended), in that one or more of the following apply:

I receive disability insurance or supplemental security income for the AGED, BLIND OR DISABLED the Social Security Act (49 State 620, 42 U.S.C. Section 301 et. Seq.)

I receive a rent or property tax rebate under the Act of March 11,1991(P.L.104 No.3) known as the "Senior Citizens Rebate & Assistance Act, On Account of Disability"

I have a handicapped license plate under 75 PA C.S. Section 1338 (Relating To Handicapped Plate and Placard)

I am a disabled veteran. Claim Number:

I make this statement subject to the criminal penalties of 18 PA C.S.section 4904 relating to unsworn falsification to authorities.

Signature: _____

Date: _____