

# Affidavit for Address Change

Dog Owner Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Current Address: \_\_\_\_\_

New Address: \_\_\_\_\_

New County: \_\_\_\_\_

Please circle License Type:                      Lifetime                      Regular

License Number: \_\_\_\_\_

Microchip or Tattoo Number: \_\_\_\_\_

Dog Name: \_\_\_\_\_

Breed: \_\_\_\_\_

Please circle Gender:    Male            Female

Age: \_\_\_\_\_

Color/Markings: \_\_\_\_\_

**I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania, pursuant to 18 Pa.C.S. § 4904, that the foregoing is true and correct.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_