

PET INFORMATION

1) Type of Pet: _____
Name: _____
Age: _____
Description: _____

2) Tenant has provided evidence (in the form of a receipt or other written verification from the pet's veterinarian) of the following: (attached evidence)

___ License: Tag #: _____ Exp. Date: _____

___ Evidence of rabies vaccine: Tag #: _____ Exp Date: _____

___ Evidence of distemper vaccine: Exp. Date: _____

___ Evidence of Spay/Neuter

3) Tenant shall provide the following information and promptly notify Management in writing of any changes. Management reserves the right to notify the veterinarian and/or emergency pet caretakers that they have been designated as such and to verify their willingness to act as such.

❖ **Veterinarian:**

Name: _____

Address: _____

Phone: _____

❖ **Emergency Pet Caretaker #1:**

Name: _____

Phone: (H) _____ (W) _____

❖ **Emergency Pet Caretaker #2:**

Name: _____

Phone: (H) _____ (W) _____

I have read, understand and agree to the terms of this Pet Policy, which is an attachment to the lease agreement. I understand that violations of any of these rules may be grounds for removal of my pet and/or termination of my tenancy.

Tenant's Name (Printed) _____

Tenant's Signature _____ Date _____

Landlord's Signature _____ Date _____