

Housing Authority of the City of Alameda

701 Atlantic Avenue - Alameda, California 94501-2161 - TEL: (510) 747-4300 - FAX: (510) 522-7848 - TDD: (510) 522-8467

PET REGISTRATION AND DESIGNATION OF ALTERNATE CAREGIVER (One form must be completed for each pet.)

Resident: _____ Complex: _____

Address: _____

I have read, understand, and agree with the Pet Policy/Pet Agreement (signed copy attached and on file with the Housing Authority). I am registering the following pet:

Type of Pet (e.g., dog, cat)	Breed (e.g., poodle, Siamese)	Describe/Color (e.g., black, calico)	Weight (e.g., 10 lbs.)	Photo <input checked="" type="checkbox"/>	Vet.* <input checked="" type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

* Veterinarian Certification. Certificate signed by a licensed veterinarian or a state or local authority empowered to inoculate animals (or designated agent of such authority) stating that the pet has received all inoculations required by applicable law, the pet has no communicable disease, and is pest free.

Attach photo -----▶

I authorize the Housing Authority to board my pet at my expense in the event I and my alternate caregiver are unable to care for my pet.

Resident's Signature: _____ Date: _____

Alternate Caregiver No. 1: As the designated alternate caregiver, I agree to care for this pet when the above-named Resident is unable to do so. If unable to fulfill this responsibility, I agree to notify the Resident and the Housing Authority by calling (510) 747-4307 or (510) 747-4308. I have read, understand, and agree with the Housing Authority's Pet Policy/Pet Agreement.

Name: _____

Address: _____ Phone: _____

Signature: _____ Date: _____

Alternate Caregiver No. 2 (optional): As the designated alternate caregiver, I agree to care for this pet when the above-named Resident is unable to do so. If unable to fulfill this responsibility, I agree to notify the Resident and the Housing Authority by calling (510) 747-4307 or (510) 747-4308. I have read, understand, and agree with the Housing Authority's Pet Policy/Pet Agreement.

Name: _____

Address: _____ Phone: _____

Signature: _____ Date: _____

DRAFT (1/4/11)

