

**RESIDENT'S PET APPLICATION**

Resident/Pet Owner \_\_\_\_\_ Date \_\_\_\_\_

Address: \_\_\_\_\_ Tel. \_\_\_\_\_

Pet type: (cat, dog, bird, etc) \_\_\_\_\_

Pet Breed: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_ Photo: \_\_\_\_\_

Weight \_\_\_\_\_ Height \_\_\_\_\_ Neutered \_\_\_\_\_ Immunization \_\_\_\_\_ Veterinarian Certificate \_\_\_\_\_

Physical Description: \_\_\_\_\_ How long have you owned the pet? \_\_\_\_\_

I hereby agree to abide by all rules and regulations in effect at this time and all rules and regulations adopted after this date.

**X** \_\_\_\_\_  
Resident Signature \_\_\_\_\_ Date \_\_\_\_\_

FOR OFFICE USE ONLY

Sponsor Name \_\_\_\_\_ Relationship to Owner \_\_\_\_\_

Address \_\_\_\_\_

Tel. no. \_\_\_\_\_ Cell no. \_\_\_\_\_

Complaints \_\_\_\_\_

Pet Deposit:  
Date Paid: \_\_\_\_\_ Amount \$ \_\_\_\_\_ Pet Removed \_\_\_\_\_ Deposit Returned \_\_\_\_\_  
(date) (date)

APPLY PICTURE HERE

**GEORGETOWN HOUSING AUTHORITY**

**PET SPONSOR FORM**

Sponsor Name \_\_\_\_\_

Sponsor Address \_\_\_\_\_

Daytime Phone no. \_\_\_\_\_

Cell no. \_\_\_\_\_

Evening Phone no. \_\_\_\_\_

Relationship to Pet Owner \_\_\_\_\_

Name of Resident: \_\_\_\_\_

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

Pet: Breed \_\_\_\_\_ Sex \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

I accept responsibility for the above Residents Pet in case of an emergency. I will pick up or arrange to have the above named Pet picked up within two (2) hours of phone call and care for Pet until such time as Pet may be returned to Resident/Owner or disposed of.

\_\_\_\_\_  
Sponsor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Sponsor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Notary Public

(PLEASE AFFIX SEAL HERE)

\_\_\_\_\_  
My Commission Expires