VETERINARIAN CERTIFICATION

_____	_____	_____
Last Name	**First Name**	**Address**

Is requesting authorization to maintain a dog or a cat in their residence. Because certain restrictions apply, a certification from a veterinarian is required. Please complete this form and return it to the above-named individual for submission to the Hagerstown Housing Authority.

ANIMAL INFORMATION (to be completed and signed by veterinarian)

_____	_____	_____
Name of Animal	Age of Animal	Spayed/Neutered [Yes/No] Date if known
_____	_____	_____
Cat/Dog	Breed	Male/Female

_____	_____	_____	_____
Predominant Colors	Mature Weight	Mature Height	Rabies

License #

Please List Immunizations and Date of Immunizations:

_____ _____

_____ _____

_____ _____

The above designated animal was last examined by me on:_____ (Date) and is current on all required immunizations.

Residents are not permitted to maintain animals that are vicious or aggressive on Housing Authority Property. Animals that are vicious or aggressive are defined, for these purposes, as: (i) any animal that constitutes a physical threat to human beings or other animals; or (ii)any animal that, due to its disposition or demonstrated behavior, could reasonably cause injury to human beings or other animals; or (iii) any animal that has bitten or attacked a human being or another animal.

_____ I have no reason to believe that this animal is vicious or aggressive.

_____ I have reason to believe that this animal may be considered vicious or aggressive.

_____	_____
Signature of Veterinarian	**Date**
_____	_____
License Number	**Telephone Number**

_____

Address