

# DOMINION STATION CONDOMINIUM PET REGISTRATION FORM

Return to:  
Dominion Station Condominium  
c/o American Management of Virginia  
722 East Market Street, Suite 100  
Leesburg, VA 20176  
Phone: 703-771-3995 // Fax: 703-771-4185  
Email: [llombardo@amvirginia.com](mailto:llombardo@amvirginia.com)

## I. APPLICANT INFORMATION:

Print Name: \_\_\_\_\_ Address \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Email: \_\_\_\_\_

## II. PET INFORMATION:

Pet Name: \_\_\_\_\_ Dog \_\_\_\_\_ Cat \_\_\_\_\_ Other: \_\_\_\_\_

Breed: \_\_\_\_\_ Color(s)/distinctive markings: \_\_\_\_\_ Weight \_\_\_\_\_

Additional information to identify pet: \_\_\_\_\_

Rabies tag number: \_\_\_\_\_ License number: \_\_\_\_\_

## III PERSON TO CONTACT IN CASE OF EMERGENCY:

Name: \_\_\_\_\_ Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

## IV. INDEMNIFICATION:

By virtue of keeping my pet(s) within the Property I agree to indemnify and hold the Council, each member and the Board of Directors free and harmless from any loss, claim or liability of any kind or character what ever arising by reason of my keeping the above pet(s) within the Property.

**I certify that I have read and agree to the pet policies contained in Article XX, Section 1 (h), of the Bylaws and Policy Resolution #01-02, Pet Policies, and hereby incorporated by reference.**

Applicant's Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Note: If this application is submitted by a lessee, the Owner or Owner's Agent must sign below.**

Owner's or Agent's Signature: \_\_\_\_\_ Date \_\_\_\_\_