

Tres Vidas Condominium Association
Emotional Support and Service Animals

1. Have the Veterinarian fill out the attached form
2. Attach all certificates for the animal regarding shots, etc.
3. Attach a letter from your Physician
4. Attach a copy of the Animal Registry with the Photo on it

Return all paperwork to the Association for verification, and you will be notified of an Approval, or Non-Approval.

Tres Vidas Condominium Association, Inc.

Dear Resident,

Tres Vidas Condominium Association advises that when you request an accommodation to the pet registration for tenants, you must adhere to the following:

The dog must be on a leash at all times when outside the unit, held by a responsible person who is capable of, and is actually in physical control of the dog.

The dog must not run loose when the dog is outside the unit; and does not become a nuisance, including but not limited to does not; lunge toward, jump on, charge or attack any individual or other animal; bark, howl or otherwise create noise which is heard outside of the unit; and/or act in such a manner that disturbs other residents or resident's guests.

Additionally, please ensure that the dog is walked or curbed in a grassy area and the dogs waste is properly picked-up, sealed and properly disposed of with the Unit's garbage in a properly sealed bag.

The Association thanks you for your attention to this matter and your anticipated compliance.

Please initial and return _____ Date _____

Very truly yours,
Tres Vidas Condominium

Veterinarian's Certificate

The undersigned verifies that:

1. I am authorized to practice medicine in the State of Florida.
2. My office address is _____
My office telephone number is _____
3. I have provided veterinary services for _____
the Owner of the (circle one) Dog Cat Bird named _____
4. The Animal Breed is _____
5. The Animals age is _____ years.
6. The Animal is currently _____ lbs. in weight, _____ inches high,
_____ inches long. Maximum weight at maturity is approx. _____ lbs.
7. I first examined the Animal on _____
8. I last examined the Animal on _____
9. The Animal is current with all vaccinations specifically including, but not
limited to rabies and was last vaccinated on _____ and is due
on _____. (Attach a copy of the rabies vaccination certificate and records or
invoices verifying that all other vaccinations are current)
10. A copy of the Palm Beach County Animal Care & Control License.

Veterinarian Signature

Print Name