Authorization for Pet Ownership

I have read and understand the Pet Policy of the Housing Authority of the City of Buffalo (Authority). I hereby agree to abide by this policy and understand that a violation of the policy may result in removal of the animal, charges assessed against me, and/or eviction.

_____ _____

Tenant Name (Please print) Unit #

_____ _____

Tenant / Animal Owner Date

_____

Pet's Name (Please print)

Description of Pet (Ex: dog, cat, color, size, breed, gender):

_____

_____

Attachments:

1. Photo of Pet
2. Inoculation Record and License, updated annually
3. Verification that Pet has been spayed or neutered

Person to be contacted in an emergency:
The following person has agreed to care for the above pet if I for any reason become incapable or unable to care for the pet myself.

Name: _____
Address:_____
Phone: _____

Tenant has paid a pet deposit of $ _____.

_____ _____

Authority Representative Date