

PET APPLICATION

OWNER INFORMATION

Name: _____

Address _____ City _____ Apt. No. _____

Home Phone _____ Work Phone _____

CONDITIONAL AUTHORIZATION FOR PET

You may keep the pet that is described below in the dwelling until the Lease Agreement expires. But we may terminate this authorization sooner if your right of occupancy is lawfully terminated or in our judgment you and your pet, your guests, or any occupant violate any of the rules in this Application.

(Please attach a photo of your pet here)

PET INFORMATION

Pet's Name: _____

Type/Breed: _____ Yr Of Birth: _____

Sex: _____ Weight: _____ License No. _____

How long have you owned this pet? _____ (yrs/mos)

Has your pet been spayed or neutered? YES ☐ NO ☐

Does your pet wear a collar w/visible ID? YES ☐ NO ☐

Veterinarian: _____ Phone: _____

Vet's Address: _____

Emergency Caretaker: _____ Phone: _____

Caretaker's Address: _____

Do you have a letter from your Vet stating that your pet is in good health and up-to-date on vaccinations? YES ☐ NO ☐

Provide a report of vaccines and dates of administration, signed by a licensed veterinarian, confirming that the pet is current in its Rabies vaccination, and all other vaccines recommended by such veterinarian.

Have there been any complaints about your pet at your current address? YES ☐ NO ☐

If so, what was the problem (and solution)? _____

Does your pet have any medical or behavioral problems? YES ☐ NO ☐

If so, what treatment or training has pet received? _____

Who cares for your pet when you are on vacation or away? _____

How much time does your pet spend alone each day? _____

How often do you treat your pet for fleas and ticks? _____

FOR CAT OWNERS:

Do you keep your cat indoors? YES ☐ NO ☐

Does your cat use a litter box? YES ☐ NO ☐

FOR DOG OWNERS:

Is your dog housetrained? YES ☐ NO ☐

Do you keep your dog on a leash when you go for walks? YES ☐ NO ☐

Do you always clean up your dog's waste when walking him? YES ☐ NO ☐

Have you and your dog completed a dog training class? YES ☐ NO ☐

Has your dog ever bitten anyone? YES ☐ NO ☐

I have read and understand the policies related to keeping pets in this rental property. I and all members of my household promise to fully comply.

Date: _____

Applicant _____

UNAUTHORIZED USE PROHIBITED

For Members Only
Apartment Association,
California Southern Cities
Approved Form # F02 – 2/21

