

## Application for Public Pet Rehoming Permit

Full Name of Party Requesting Permit	
Home Address	
Contact Information	
Home Phone	Cell or Work Phone
E-Mail Address	
Name and address of business or location where you intend to rehe	ome pets
Type of animal(s):	
☐ Dog / Puppy ☐ Cat / Kitten Number of pets	
Date of birth of animal(s) being rehomed	
If DOB unknown, approximate age(s)	
Breed or Type (if cat, enter short hair, medium hair or long hair if br	eed unknown)



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Please list and describe each animal that will be on-site below:

Name	Primary Color	Secondary Color	Distinguishing Features	Sex		
				Party + 1		
				grand galanting and a second grand galanting and a second galanting and a second galanting and a second galanting and a second galanting		
sertify that the above information is accurate and agree to comply with the following:  It is my responsibility to ensure that the animals are in good health and are provided with appropriate water, food, shelter and protection from the elements.  The permit will be posted within six feet of the enclosure housing the animals and be visible at all times.  The permit will be Public Pet Rehoming Health Certificate For Dogs or Cats and Authorization for Public Pet Rehoming signed by the usiness or property owner (must be on official letterhead).						
pplicant Signature			Date Submitted			

This application and attachments may be submitted via e-mail, fax, or U.S. mail. Please allow five days for approval.

Mesa County Animal Services
Physical address: 971A Coffman Road, Whitewater, CO 81527
Mailing address: P.O. Box 20,000, Grand Junction, CO 81502-5002
Phone: 970.242.4646 Fax: 970.245/5315

Phone: 970.242.4646 Fax: 970.245/5315 e-mail: ac.dispatch@mesacounty.us



## Public Pet Rehoming Health Certificate For Dogs or Cats

1. Name, Address and Telephone Number of Owner						
2. Type of Animal:   Dog/Pup						
	3. Animal Identifica	· · · · · · · · · · · · · · · · · · ·				
Name	Breed	Age	Sex	Color or Distinctive Marks		
(1)	-					
(3)						
(4)				1112		
(5)						
(6)						
(7)						
(8)						
(9)				1-70-70-		
(10)			-			
4. VETERINARY CERTIFICATION:						
date, that each animal is curren				_		
and health or required by law, e	_					
of any infectious diseases. I obs			f these a	inimals.		
NAME, ADDRESS AND TELEPHO	NE NOMBER OF IZZOING VETER	IINAKIAN				
SIGNATURE OF ISSUING VETERI	NARIAN	LICENSE NU	IMBER	DATE		

## Authorization for Public Pet Rehoming

l,	authorize
	_ to display for rehoming (sale, barter or
	ttens at our business or agency located at I understand that by granting
this permission, there may be potenti by these animals.	ial liabilities for damages or injuries caused
I agree that if I observe any mistreatm Mesa County Animal Services at 242-4	nent or neglect of the animals, I will contact 646 immediately.
This authorization is good from, insert/ /_ to/ /	dates of no more than 30 days, or from
	of the business or of the business or l, I have full authorization to grant this
	thorization at any time for any reason and if County Animal Services at 242-4646 and the
Signature	Date