



177 Day Island Rd., Eugene, OR 97401 • PH 541-682-3755 • FAX 541-682-3411
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Homes. People. Partnerships. Good. www.homesforgood.org

ASSISTANCE ANIMAL REGISTRATION

The tenant named below acknowledges they have read, and agree to abide by, the Homes for Good Assistance & Service Animal Guidelines. Tenant is registering an Assistance Animal described below, **which has been authorized by Homes for Good**, to live in the dwelling unit located at the address listed below.

TENANT:

TENANT NAME: _____

ADDRESS: _____

PHONE NUMBER: _____ MESSAGE PHONE: _____

DESCRIPTION OF ANIMAL:

ANIMAL'S NAME: _____ AGE: _____

SPECIES/BREED: _____ WEIGHT: _____ HEIGHT: _____

COLOR: _____ SPECIAL MARKS: _____

DOG LICENSE NUMBER: _____ DATE EXPIRES: _____

How long have you had this animal? _____ Years and _____ Months

VETERINARIAN:

NAME: _____ PHONE: _____

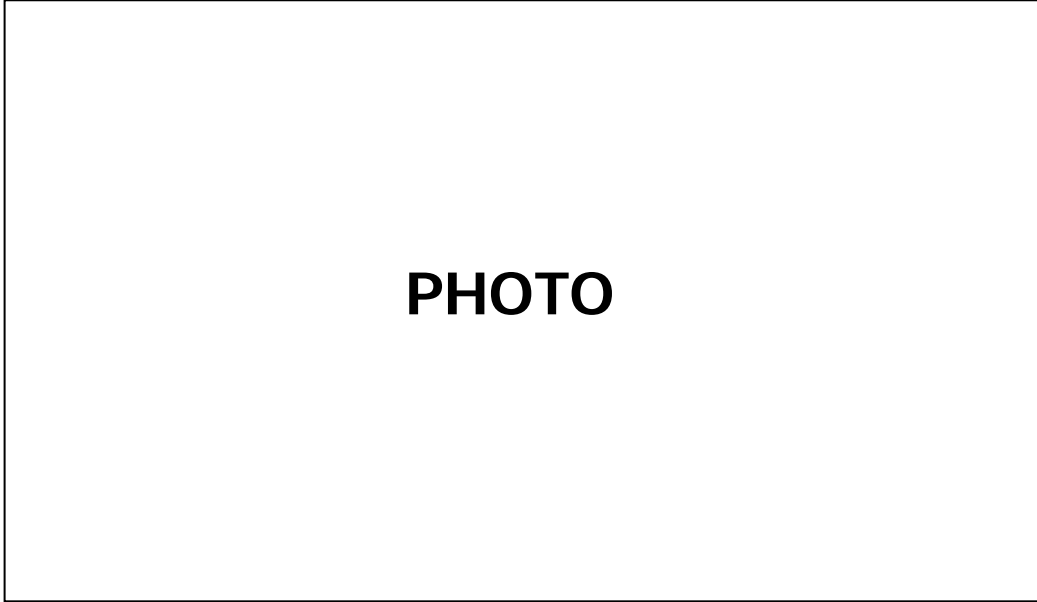
ADDRESS: _____

Has this animal ever acted aggressively, bitten or hurt anyone? If so, please describe:

IF YOU ARE REGISTERING A CAT OR DOG, PLEASE ATTACH:

1. (Dogs only) A copy of the dog license for the tenant's city of residence.
2. A copy of the animal's health record, if available.
3. A photograph of the animal.

IF YOU ARE REGISTERING A CAT OR DOG, PLEASE ATTACH PHOTO HERE:



If you do not have a photo of your animal, please contact your Property Manager.

Tenant Signature

Date

FOR OFFICE USE ONLY

Date Assistance Animal Authorized by Homes for Good: _____

Signature: _____ Date: _____

Property Manager

RESPONSIBLE PARTY CERTIFICATION

(Please Print)

By signing this certification, the undersigned party(s) agrees to take responsibility for the animal described below.

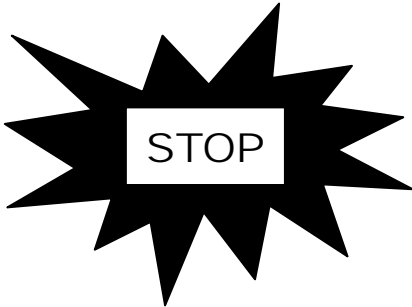
Resident Name: _____

Address: _____
Street City Zip

Phone No: _____ Animal Type: _____

If the health or safety of the animal is threatened by the death, incapacity, or other factors that render the Resident unable or unwilling to care for the animal, the below-named party(s) agrees to remove the animal from the premises, either temporarily or permanently.

If Homes for Good is unable to reach the Responsible Party, it may contact any authorized State or local agency to take custody of the animal, or may itself enter the unit without notice and remove the animal. Homes for Good accepts no responsibility for animals so removed.



CERTIFICATION OF RESPONSIBLE PARTY

The person who is responsible for your animal must fill out the following form. *This person may not be a household member or reside in any Agency Owned Housing.*

To Be Filled Out and Signed By Responsible Party ONLY
(Please print)

Name: _____

Address: _____
Street City Zip

Relationship to Resident: _____

Home Phone: _____ Work Phone: _____

Message Phone: _____

I certify I will assume the responsibilities described above and will respond to Homes for Good's request for action:

Signed: _____ Date: _____
(Responsible party)