

**Additional Pet Application - 3235 Martha Custis Drive
Resolution Worksheet**

Date: January 15, 2020

Suggested Motion:

“I move to approve an additional pet at 3235 Martha Custis Drive”.

2nd:

Summary: There are no complaints on file for the first pet.

Vote:

	In Favor	Opposed	Abstained	Absent
Scott Buchanan				
Dan Courtney				
Susan Cox				
Maria Wildes				
James Konkel				
Rich Moha				
Kathy Schramek				
Nicholas Soto				
Robin Woods				

Foster Parent Signature: _____ Date: _____

By my signature below, I as the Unit Owner, acknowledge that I am aware of and agree to abide by the Pet Policy set forth in the Parkfairfax Condominium Unit Owner's Association Policy Resolution Number Seven, relating to the keeping of pets. I further acknowledge my responsibility to make my tenants aware of Policy Resolution Number Seven.

Unit Owner Signature: _____ Date: _____
 Address: _____ (H)
 _____ (W) _____ (C) _____

For Management Office Use Only:

Received: _____

General Manager Signature Date _____

Revised 1/18/17

**PARKFAIRFAX CONDOMINIUM ASSOCIATION
 ADDITIONAL PET APPLICATION**

Name: Kathy S Temple Phone# : () ,

Work# : () Ret

Address: 3235 Martha Custis Dr

Unit Owner Name and Address: _____
 (if different than above)

I seek approval for an additional pet in my home.

I presently have: 1 dog Lucy
 (Number and type of pets)

I wish to add: 1 dog Peaches (Name
 and type of pet)

Current City of Alexandria Registration # : (Cats/~~Dogs~~) _____ (copy of the city of
 Alexandria registration form must be attached)

Date and registration of rabies inoculation: (Cats/Dogs) _____

No pet (cat or dog) will be permitted on the Common or Limited Elements unless carried or restrained on a leash and under the direct control of a responsible person.

By my signature below, I affirm that I will abide by the decision of the Board of Directors. I further confirm that such additional pets will not be used for commercial breeding purposes and that they are properly registered at the Unit Owners Association. I acknowledge and will abide by the pet policies set forth in Parkfairfax Condominium Unit Owner's Association Policy Resolution Number Seven, related to the keeping of pets.

I also confirm that as of this date, my pet is current on all inoculations.

Kathy S Temple _____ **Pet Owner**
Signature Date

=====

By my signature below, I as the Unit Owner, acknowledge that I am aware of and agree to abide by the Pet Policy as set forth in the Parkfairfax Condominium Unit Owner's Association Policy Resolution Number Seven, relating to the keeping of pets. I further acknowledge my responsibility to make my tenants aware of Policy Resolution Number Seven.

Kathy S Temple _____
Unit Owner Signature Date (See back page)

BOARD USE ONLY: REVIEW DATE: _____

APPROVAL DATE _____

HEARING DATE: _____

APPROVAL VERIFICATION SIGNATURE

GENERAL MANAGER: _____

NOT APPROVED: _____

REASONS FOR NOT APPROVING: _____

NON-APPROVAL VERIFICATION SIGNATURE

GENERAL MANAGER: _____ Date _____

===== OFFICE USE ONLY
NO PENDING PET COMPLAINTS NO PREVIOUS PET COMPLAINTS

Revised 8/21/19

Animal Welfare League Of Alexandria
4101 EISENHOWER AVE ALEXANDRIA, VA 22304
(703) 746-4774

Receipt Number: R19-006641

Receipt Date: Thursday, December 19, 2019

Person Information: KATHY TEMPLE
3235 MARTHA CUSTIS DR
ALEXANDRIA, VA 22302

PID: P102002

Received From: KATHY TEMPLE

Check No:

Phone: (540) 220-1226

Item:	Animal ID:	Reference No:	Price:	Qty:	Amount:
LICENSE SENIOR DOG S	A079059	L19-135110	\$5.00	1	\$5.00
LICENSE SENIOR DOG S	A079060	L19-135109	5.00	1	5.00

Total Fees Due: **\$10.00**

Payments: Cash: \$10.00

Check: \$0.00

Credit Card: \$0.00

Total Payments Received: **\$10.00**

Thank You!

Change: \$0.00

Balance Due: \$0.00

Animal Information:

A079059 - PEACHES - 8 YEARS OF AGE, SPAYED, BICHON FRISE/POODLE TOY, WHITE DOG
A079060 - LUCY - 9 YEARS OF AGE, SPAYED, PARSON RUSS TER, WHITE AND BROWN DOG

License Information:

Tag Number:	Expires:	Animal ID:	Vacc Date:	Term:	Vacc Expires:	Type:	Amount:
L19-135109	09/06/20	A079060	09/07/17	36	09/07/20	LIC SR DOG S	\$5.00
L19-135110	12/19/20	A079059	10/15/18	36	10/14/21	LIC SR DOG S	\$5.00
TOTAL LICENSE FEES:							\$10.00

Business Hours: Weekdays 9 AM - 7 PM ****Closed Wednesday**** Saturday - Sunday 12 PM - 5 PM

Animal Visitation: Weekdays 12 PM - 7 PM ****Closed Wednesday**** Saturday - Sunday 12 PM - 5 PM

Clerk: JACOSTA SHELTER

Transaction Date: 12/19/19

12:21:14PM

Print Date: 12/19/19

CERTIFICATE OF VACCINATION

Date of Rabies Vaccination: 9/7/2017
Next Rabies Vaccination On: 9/6/2020

Certificate No: 0
Previous Rabies Vaccination: 0357

VETERINARY CLINIC
Millsboro Animal Hospital
26984 John J Williams Hwy
Millsboro, DE 19966
302-945-2330
This is to certify...

OWNER OF ANIMAL
Kathy Temple
118 Bobbys Branch Road
Millsboro, DE 19966
County:

THAT I HAVE VACCINATED AGAINST RABIES THE ANIMAL DESCRIBED BELOW.

Patient information...

PATIENT: Lucy
SPECIES: Canine
SEX: S
Id : 050*593*872
Color and markings... White & Brown

TAG NO: 3493
WEIGHT: 20.20
AGE: 9 years

Signed _____

Misty Wright own

Misty Wright

License: N1-0002741

Vaccinations done...

9/5/2019	MW	Lyme Vaccine 1 Year	9/4/2020
9/7/2017	MW	DHPP 3 Year	9/6/2020
9/7/2017	MW	Rabies Vaccination 3 Year, #3493	
		9/6/2020	
9/27/2016	AR	Bordetella Oral 1 Year	
9/30/2014	JS	Bordetella Vacc. (1 Year) Kennel Cough	

Rabies Vaccine Information...

MFG BY: RABVA
LOT EXP: 09/24/18

SER.NO: 117139B
ADM: Sq

CERTIFICATE OF VACCINATION

Date of Rabies Vaccination: 10/15/2018
Next Rabies Vaccination On: 10/14/2021

Certificate No: 0
Previous Rabies Vaccination: 1555

VETERINARY CLINIC

Millsboro Animal Hospital
26984 John J Williams Hwy
Millsboro, DE 19966
302-945-2330
This is to certify...

OWNER OF ANIMAL

Kathy Temple
118 Bobbys Branch Road
Millsboro, DE 19966
County:

THAT I HAVE VACCINATED AGAINST RABIES THE ANIMAL DESCRIBED BELOW.

Patient information...

PATIENT: Peaches

SPECIES: Canine

SEX: S

Id :

Color and markings... White

TAG NO: 5296

WEIGHT: 9.07

AGE: 8 years

Signed _____

Misty Wright DM

Misty Wright

License: N1-0002741

Vaccinations done...

10/15/2018	MW	Rabies Vaccination 3 Year, #5296	
		10/14/2021	
10/15/2018	MW	DHPP 3 Year	10/14/2021
9/27/2016	AR	Bordetella Oral 1 Year	

Rabies Vaccine Information...

MFG BY: RABVA
LOT EXP: 09/24/18

SER.NO: 117139B
ADM: Sq