

Additional Pet Application – 3444 Gunston Road Resolution Worksheet

Date: July 15, 2020

Suggested Motion:

“I move to approve an additional pet at 3444 Gunston Road”.

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				
Dave Bush				
Nicholas Soto				
Robin Woods				
Jeff Lisanick				

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: Margo Preskill Phone#: _____

Work#: (____) _____

Address: 3444 Gunston RdUnit Owner Name and Address: _____
(if different than above)

I seek approval for an additional pet in my home.

I presently have: 1 cat
(Number and type of pets)I wish to add: 1 cat (Eddy/Eddison orange tabby) (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) 12/20/19 # 14767

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.

[Signature]
Signature

6/25/20
Date

Pet Owner

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.

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

CERTIFICATE OF VACCINATION

Date of Rabies Vaccination: 12-21-19
Next Rabies Vaccination On: 12-20-20

Certificate No: 0
Previous Rabies Vaccination:

VETERINARY HOSPITAL
Arlington Animal Hospital
2301 Columbia Pike #G-1
Arlington, VA 22204
703-920-5300

OWNER OF ANIMAL
Margo Preskill
2003 Columbia Pike
Arlington, VA 22204
County:

This is to certify...

THAT I HAVE VACCINATED AGAINST RABIES THE ANIMAL DESCRIBED BELOW.

Patient information...

PATIENT: Edison
SPECIES: Feline
BREED: Domestic Shorthair
SEX: N

MICROCHIP:
TAG NO: 14767

WEIGHT: 14.60
AGE: 8 years

Color and markings... Orange Tabby

Signed _____

Jacob London, DVM

License: 0301203568

Rabies Vaccine Information...

NAME: PURVAX
MFG BY: MER
LOT EXP: 25OCT20

SER.NO: 17482A
ADM: SQ

An animal is not considered immunized for at least 28 days after the initial or primary rabies vaccination is administered.



Fwd: Your PetLicense Receipt

Margo P. <margopreskill@gmail.com>

Thu 7/2/2020 9:28 AM

To: Miranda Harrington <mharrington@parkfairfax.info>

Margo preskill

3444 gunston

----- Forwarded message -----

From: **PetData PetLicense** <petlicense@petdata.com>

Date: Thu, Jun 25, 2020, 8:02 PM

Subject: Your PetLicense Receipt

To: <margopreskill@gmail.com>

Receipt

Thank you for your payment! Please keep a copy of this receipt for your records. This receipt is not proof of current license.

Your license application will be reviewed and entered. Once it is complete with all required paperwork, your license receipt will be mailed within 10 business days. A license tag will be included with all first-time licenses. A new tag will not be issued for a renewal license unless purchased at the time of renewal.

Residence

3444 GUNSTON RD
ALEXANDRIA, VA 22302-2134

Billing

Information

3444 GUNSTON RD
ALEXANDRIA, VA 22302-2134
Paid with card ending in 5414

Receipt Number & Date

ALX-38PKUZI 6/25/2020

Order Detail

Pet Name	Requirements	License
Edison	Proof of vaccination : OK Proof of sterilization : OK	\$2.00
Subtotal		\$4.00
Service Charge		\$2.00
Total		\$6.00

Pet Name	Requirements	License
Curtis	Proof of vaccination : OK Proof of sterilization : OK	\$2.00
Subtotal		\$4.00
Service Charge		\$2.00
Total		\$6.00