## Additional Pet Application – 3444 Gunston Road Resolution Worksheet

Date:	July	15.	2020
Date.	D LAL T		2020

## **Suggested Motion:**

"I move to approve an additional pet at 3444 Gunston Road",

2<sup>nd</sup>:

**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			Y	
Jeff Lisanick				

Foster Parent Signature:	Date:	
By my signature below, I as the Unit Owner, the Pet Policy set forth in the Parkfairfax Con Number Seven, relating to the keeping of pet tenants aware of Policy Resolution Number S	dominium Unit Owner's Association P s. I further acknowledge my responsib	olicy Resolution
Unit Owner Signature:	Date:	
Address:(W)	(C)	(T)
For Management Office Use Only:		
Received:		
General Manager Signature Date		
Revised 1/18/17		
	NDOMINIUM ASSOCIATION L PET APPLICATION Phone#:	
'Work# :()		
Address: 3444 Goundon Rd		
Unit Owner Name and Address: (if different than above)		
I seek approval for an additional pet in my ho	me.	
I presently have: 1 Ca+	=-1	
(Number and type of pets)		
I wish to add: 1 Cat LEddy /Edd is and type of pet)	son arange talby)	_ (Name
Current City of Alexandria Registration # : Alexandria registration form must be attac		ne city of

## 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.

<u> </u>	Pet Öwner
	===
By my signature below, I as the Unit Owner, acknowledge that I am aware of the Pet Policy as set forth in the Parkfairfax Condominium Unit Owner's Asso Resolution Number Seven, relating to the keeping of pets. I further acknowled to make my tenants aware of Policy Resolution Number Seven.	ciation Policy
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** 

	Pet Policy 2019
GENERAL MANAGER:	Date
NO PENDING PET COMPLAINTS	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: 0301203563

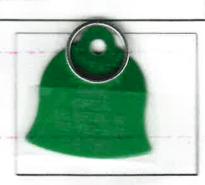
Rabies Vaccine Information...

NAME: PURVAX

MFG BY: MER SER.NO: 17482A

LOT EXP: 25OCT20 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**

. مرم ، Margo P. <

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: <

## 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

**Billing** 

**Information** 

3444 GUNSTON RD

ALEXANDRIA, VA 22302-2134 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

ret name	кеquirements	License
Curtis	Proof of vaccination : OK Proof of sterilization : OK	\$2.00
Subtotal		\$4.00
Service Charge		\$2.00
Total		\$6.00