# Additional Pet Application – 1733 Preston Road Resolution Worksheet

Date: October 18, 2023

# **Suggested Motion:**

"I move to approve an additional pet at 1733 Preston Road".

2<sup>nd</sup>:

**<u>Summary:</u>** There are no complaints on file for the first pet.

#### Vote:

|                 | In Favor | Opposed | Abstained | Absent |
|-----------------|----------|---------|-----------|--------|
| Scott Buchanan  |          |         |           |        |
| Dave Bush       |          |         |           |        |
| Peggy Clancy    |          |         |           |        |
| Claire Eberwein |          |         |           |        |
| Peter Ferrell   |          |         |           |        |
| Marieke Johnson |          |         |           |        |
| Matthew Larson  |          |         |           |        |
| Jeff Lisanick   |          |         |           |        |
| Amanda Mullan   |          |         |           |        |

|  | Pet Policy   | 2019                |
|--|--|---------------------|
| Foster Parent Signature:   | Date:  |                     |
| the Pet Policy set forth in the Parkfai                                  | Owner, acknowledge that I am aware of an<br>irfax Condominium Unit Owner's Association<br>ng of pets. I further acknowledge my respor<br>Number Seven. | n Policy Resolution |
| Unit Owner Signature:  | Date:  |                     |
| Address:(W)  | (C)  | (H)                 |
| For Management Office Use Only:  |  |                     |
|  |  |                     |
| Received:  |  |                     |
| General Manager Signature Date   |  |                     |
| Revised 1/18/17  |  |                     |
| ADE  | FAX CONDOMINIUM ASSOCIATION<br>DITIONAL PET APPLICATION<br>Phone# :(704-733-7204   |                     |
| Work# :()  |  | _                   |
| Address: 1733 Preston Rd   |  |                     |
| Unit Owner Name and Address: <u>Jenn</u><br>(if different than above)    | nifer Witt   |                     |
| I seek approval for an additional pet i                                  | in my home.  |                     |
| l presently have: <u>1 dog</u><br>(Number and type of pets)              |  |                     |
|  |  |                     |
| I wish to add: <u>Shuri, the American Domes</u><br>and type of pet)      | stic tuxedo cat  | (Name               |
| Current City of Alexandria Registra<br>Alexandria registration form must |  | f the city of       |

Date and registration of rabies inoculation: (Cats/Dogs) July 2023

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.

\_\_\_\_\_ 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.

10/2/23

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 201 | .9 |
|------------------|----------------|----|
| GENERAL MANAGER: | Date           |    |

|                           |                          | <b>OFFICE USE ONLY</b> |
|---------------------------|--------------------------|------------------------|
| NO PENDING PET COMPLAINTS | NO PREVIOUS PET COMPLAIN | TS                     |

Revised 8/21/19

# City of Alexandria, Virginia Animal License Receipt



City of Alexandria Animal Licensing C.O.PetDala PO Box 141929 Irving, TX 75014-1929

Thank you for being a responsible pet owner! Please keep this receipt as proof of your license.

#### **TAELOR A LOGAN** 1733 PRESTON RD #960 ALEXANDRIA, VA 22302-2126

#### License Tag No. 0141028

| License Date                | License Expires | Amt Paid                    | Lic Type       |
|-----------------------------|-----------------|-----------------------------|----------------|
| 08/19/23                    | 03/31/24        | \$2.00                      | Altered Cat 1Y |
| Rabies Vaccination 03/09/23 | Date            | Vaccination Exp<br>03/09/24 | iration Date   |
| Pet's Name                  | Breed           | Color                       | Sex            |
| SHURI LOGAN                 | DOMESTIC SH     | BLACK/W                     | HITE S         |

The following will be used to contact you in case your pet is found. Please call ( visit our website to update your information. Animal Welfare

Home Phone (704) 733-7204 Work Phone

Alternate Phone

Alexandr Dear Pet Owner: The metal license tag you receive with your first license permanently assigned to your pet. If a tag is not enclosed, please compare the number printed here to the number on your pet's license tag and notify us if the not match.

League

www.alexandriaanimals.org/licensing \* Toll-free 1-855-884-955