

Collingwood Pointe at the Preserve Pet Registration Form

It is the policy of Collingwood Pointe that all animals be licensed and vaccinated. In an effort to comply with state ordinances and to protect our animals, we have committed to achieving 100% registration of our residents' pets. Therefore, please complete the following form to register your pets with the Association.

Name of Owner(s) _____ Unit# _____ Phone# _____

Name of Tenant(s) (if rental) _____ Emergency
Contact _____

Total number of pets at this residence? _____ Dog(s) _____ Cat(s)

In an effort to protect and identify your pets, the Association will require identification tags for all registered pets of our community. This tag will identify your pet, and will be used to contact you in the event that your animal is found. Failure to follow all pet rules, including the registration of your pet(s), may result in enforcement assessments levied against the Unit owner.

PLEASE COMPLETE THE FOLLOWING FOR EACH PET IN YOUR HOME.

DOGS:

Name _____ Age _____ Breed _____
M/F _____ Neutered/Spayed _____ Color/Markings _____
License # _____ Rabies Vaccination Expiration Date _____
Vet _____ Vet Phone #: _____

Name _____ Age _____ Breed _____
M/F _____ Neutered/Spayed _____ Color/Markings _____
License # _____ Rabies Vaccination Expiration Date _____
Vet _____ Vet Phone #: _____

CATS:

Name _____ Age _____ Breed _____
M/F _____ Neutered/Spayed _____ Color/Markings _____
Rabies Vaccination Expiration Date _____
Vet _____ Vet Phone #: _____

Name _____ Age _____ Breed _____
M/F _____ Neutered/Spayed _____ Color/Markings _____
Rabies Vaccination Expiration Date _____
Vet _____ Vet Phone #: _____

I have received and read a copy of the pet rules and regulations as stated in Homeowner's Association Handbook. I agree to abide by these and other pet rules to be promulgated in the future.

Signature of Pet Owner _____ Date _____

Witness _____

Date Received _____