**Chain-Off Fence Request**

**To increase the chance we can help, please provide as much information as possible. There are many dogs and families in need and we have limited resources. We do our best to make the most positive impact we can with those limited resources. So the more information you can provide, the better job we can do of maximizing the very generous time and money donated to help those in need. Our limited resources only allow PETS Chain-Off Program to provide fencing assistance one time per family - even if family relocates.**

**Your Information**

First Name/Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Please use format: 999-999-9999

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Income from last year's Federal Tax return: \_\_\_\_\_\_\_\_

 **(A copy of Federal Tax Return must be attached to Fence Application. )**

Are you currently on any assistance program?\_\_\_\_\_

If so, please list all assistance you are receiving from federal, state or local agencies\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you rent your home, when does your lease expire?\_\_\_\_\_\_\_\_\_\_\_

Landlord's Name and Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If fence application is approved, we will need permission from landlord to install or make repairs to existing fence.)

What Vet do you use?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**All dogs at your home must be listed and all information completed before fence application can be submitted.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Dog's Name(s) | How Long Have you Had Your Dog(s) | Date(s) Spayed, Neutered | Date(s) of Last Rabies Vaccine | Is your dog(s) chained or tethered. How many hours a day does dog spend outside on chain? |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

If your dog is not spayed or neutered, are you willing to have them spayed or neutered?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does the dog come inside at night?\_\_\_\_\_\_\_\_\_\_\_\_

Does the dog have a dog house? \_\_\_\_\_\_\_\_\_\_\_\_

Please describe any existing fencing. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is there any other information you'd like us to know?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you hear about us? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I understand when I turn in this application the following are required for approval:

* Proof of government assistance or income
* Proof of spay and neuter for all animals living at my home
* Proof of current rabies

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of applicant/Date