



1125 EASTERWOOD DRIVE ♦ TALLAHASSEE, FLORIDA 32311  
 PHONE (850)891-2950 ♦ FAX (850)891-2977 ♦ TALGOV.COM/ANIMALS  
 TUES – FRI 10:30-6:30 ♦ SAT 10:00-5:00 ♦ SUN 1:00-5:00 ♦ CLOSED MONDAY

### TRANSFER APPLICATION

Thank you for your interest in transferring an animal from the Tallahassee Animal Services. Please print or type your responses clearly as incomplete or illegible applications will not be considered.

#### Let's Get Acquainted

|  |   |   |
|--|---|---|
| <b>Organization Contact Information</b>        |   |   |
| ORGANIZATION NAME                              |   |   |
| <input type="checkbox"/> BREED SPECIFIC RESCUE | <input type="checkbox"/> PUREBREDS ONLY | <input type="checkbox"/> RESCUES MIX BREEDS |
| ORGANIZATION ADDRESS                           |   |   |
| CITY   | STATE                                   | ZIP   |
| BUSINESS PHONE                                 |   |   |
| ORGANIZATIONS E-MAIL                           |   |   |
| ORGANIZATIONS WEBSITE/FACEBOOK                 |   |   |

|                                |
|--------------------------------|
| ORGANIZATION PRESIDENT NAME    |
| PRESIDENT CONTACT PHONE NUMBER |

|                  |
|------------------|
| APPLICANT'S NAME |
|------------------|

| OTHER ORGANIZATION MEMBERS PERMITTED TO SELECT ANIMALS AND SIGN CONTRACTS | CONTACT PHONE NUMBERS |
|---|-----------------------|
|   |                       |
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|   |                       |
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|   |                       |
|   |                       |

## About Your Organization

| Species and Breeds Accepted                             |
|---|
| BELOW, PLEASE IDENTIFY BREEDS YOUR ORGANIZATION ACCEPTS |
| CATS  |
| DOGS  |
| BIRDS   |
| RABBITS   |
| OTHER   |

| Organizational Numbers  |
|---|
| HOW MANY ANIMALS DOES YOUR ORGANIZATION MAINTAIN AT ANY GIVEN TIME?   |
| HOW MANY FOSTER HOMES DOES YOUR ORGANIZATION CURRENTLY HAVE?          |
| DESCRIBE YOUR POLICY ON THE NUMBER OF PETS PERMITTED PER FOSTER HOME. |

| Spay and Neuter  |
|--|
| WHAT IS YOUR SPAY AND NEUTER POLICY?   |
| HOW DOES YOUR ORGANIZATION ENFORCE YOUR SPAY AND NEUTER POLICY?                            |
| WHAT IS THE LONGEST AN ANIMAL WILL REMAIN IN THE ORGANIZATION BEFORE STERILIZATION OCCURS? |
| UNDER WHAT CIRCUMSTANCES WILL YOUR ORGANIZATION PLACE AN INTACT ANIMAL?                    |
| WHAT VETERINARIAN(S) DOES YOUR ORGANIZATION UTILIZE?                                       |

**Additional Information**

DESCRIBE THE TYPE OF HOUSING/SHELTER THE ANIMALS WILL RECEIVE WHILE IN YOUR ORGANIZATIONS CARE.

ARE ANY ANIMALS KEPT STRICTLY OUTDOORS? NO YES, IF YES, WHAT ARE THE CIRCUMSTANCES AN ANIMAL IS HOUSED STRICTLY OUTDOORS?

DOES YOUR ORGANIZATION RE-HOME ANIMALS WITH OTHER RESCUE GROUPS OR SHELTERS?

HOW DOES YOUR ORGANIZATION HANDLE ANIMALS THAT ARE SURRENDERED TO ANOTHER FACILITY IF THE ADOPTER NO LONGER WANTS THE ANIMAL?

ARE THERE CERTAIN BEHAVIORS OR MEDICAL CONDITIONS YOUR ORGANIZATION IS NOT PREPARED TO UNDERTAKE?

HAVE YOU READ AND FULLY UNDERSTAND TAS's TRANSFER POLICY (CIRCLE)? YES NO

CAN YOUR ORGANIZATION PROVIDE A COPY OF AN ACTIVE 501c3 STATUS (CIRCLE)? YES NO

- I have read and understand the terms as outlined on the Transfer Policy.
- I understand that failure to follow any of the terms and conditions as outlined in the Transfer Policy may result in immediate termination of my ability to rescue animals from TAS.
- I understand that verification of spay and neuter procedures must be submitted to TAS upon their completion.
- I understand that a Transfer Contract must be completed before I can remove any animal from TAS.
- I understand that verification of spay and neuter procedures must be submitted to TLCASC upon their completion.
- I understand that a Transfer Agreement must be completed before I can remove any animal from TLCASC.
- I understand that failure to follow any of the terms and conditions as outlined in the Transfer Policy may result in immediate termination of my ability to rescue animals from TLCASC.

I \_\_\_\_\_, have read the above statements and attest that all of the information I have provided on this application is accurate and true.

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Applicant's signature

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Date