



## Spay and Neuter At Risk and At Large Pets



<b>APPLICANT INFORMATION</b>			
PET OWNERS (MUST BE 18 YEARS OF AGE OR OLDER)			
LAST NAME:		FIRST NAME:	
STREET ADDRESS:			
CITY:		STATE:	ZIP CODE:
HOME PHONE:		CELL PHONE:	
EMAIL ADDRESS:		DRIVER'S LICENSE #:	
<b>ANIMAL INFORMATION (ANIMAL MUST BE 8 WEEKS OF AGE OR OLDER)</b>			
PETS NAME:		AGE:	SEX: ___ MALE ___ FEMALE
SPECIES: ___ DOG ___ CAT		BREED(S):	WEIGHT:
ANY KNOWN MEDICAL ISSUES? (IF YES, PLEASE DESCRIBE)			
RABIES VACCINATED: ___ YES ___ NO		VACCINATION PROVIDER:	
DATE OF VACCINATION:		DATE OF EXPIRATION:	TAG#:
<b>QUALIFICATIONS (PLEASE INDICATE BY CHECKING THE BOX OF THE APPLICABLE QUALIFYING CRITERIA)</b>			
___ I RESIDE IN AN AREA OF EXTREMELY HIGH ANIMAL INTAKE FOR ANNE ARUNDEL COUNTY ANIMAL CARE & CONTROL (21061, 21060, 21122, 21225, 21144, 21146, 21113, 21403, 21409, 21401, 21037) (MUST ALSO QUALIFY BASED ON INCOME)		___ HOUSEHOLD INCOME IS LESS THAN 80% OF THE MEDIAN INCOME FOR HOUSEHOLDS IN THE STATE OF MARYLAND MEANING \$78,768 OR LESS OR ANNE ARUNDEL 80% OF ANNE ARUNDEL COUNTY'S MEDIAN HOUSEHOLD INCOME MEANING \$86,580 OR LESS	
___ HEAD OF HOUSEHOLD OR SECOND EARNER IS RECIPIENT OF VETERAN'S OR SOCIAL SECURITY DISABILITY BENEFITS		___ HEAD OF HOUSEHOLD OR SECOND EARNER IS CURRENTLY RECEIVING SOME TYPE OF GOVERNMENT ASSISTANCE	
___ RATE OF PAY FOR THE HEAD OF HOUSEHOLD OR SECOND EARNER IS LESS THAN \$41.62 PER HOUR		___ HEAD OF HOUSEHOLD OR SECOND EARNER IS UNEMPLOYED	
___ HOUSEHOLD INCOME IS BELOW THE FEDERAL MINIMUM POVERTY LEVEL AS SET FORTH IN THE MOST RECENT HHS FEDERAL POVERTY GUIDELINES (SEE ATTACHED)		___ TARGETED PET OWNER (SEE STAFF TO MARK BELOW) ___ LITTER ___ GU ___ ACCO ___ RECLAIM ___ PITY ___ MDA (MUST ALSO QUALIFY BASED ON INCOME)	
<b>I CERTIFY THE ABOVE STATEMENTS ARE TRUE AND ACCURATE:</b>			
PRINTED NAME:		SIGNATURE:	
<b>OFFICIAL USE ONLY</b>			
RECEIVED: ___/___/___		APPROVED:	REFERRAL TYPE ___ LITTER ___ GU ___ ACCO ___ RECLAIM ___ PITY ___ MDA
SURGERY DATE SCHEDULED: ___/___/___		DATE SURGERY PERFORMED: ___/___/___	
RABIES VACCINE: ___ YES ___ NO	COST - SPAY/NEUTER:		COMPLICATIONS/FRIENDS COSTS: