

**KAWARTHA LAKES-HALIBURTON
HOUSING CORPORATION**

Pets -Schedule A

Pet Agreement

Last Name	First Name
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Apt/Unit Number	Street Number	Street Name
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Town/City	Province	Postal Code
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Home Phone Number	Work Phone Number (if allowed calls)	Cell Phone Number
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Email Address

Contact:	Phone:	Relationship:
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Please provide the following information. Note that all dogs must have dog tags and proof of renewal must be provided annually.

I have the following Pets:

Breed/Type	
Gender	
Approx. Weight	
Colour	
Age	
Name	
Neutered/Spayed	
Vaccination	
Municipal Dog Tag #	

Breed/Type	
Gender	
Approx. Weight	
Colour	
Age	
Name	
Neutered/Spayed	
Vaccination	
Municipal Dog Tag #	

I agree to abide by the Kawartha Lakes Haliburton Housing Corporation's Pet Policy.

Tenant

Date