



*Housing Authority
Of the
City of Needles*

This agreement is attached and hereby incorporated with the Lease dated _____, between the Housing authority of the City of Needles and _____.

Lease addendum effective on _____.

Tenant desires to keep the following described pet in the dwelling unit:

Type:
Breed:
Approximate Current Height and Weight
Approximate expected (adult) Height and Weight
Name:

Tenant must provide the Housing Authority with proof of Spay or Neuter as well providing current Inoculation (vaccination) records, City of Needles licensing records, and color photograph of pet on an annual basis, in conjunction with Tenant's Reexamination.

Inoculation records received on:
City of Needles Licensing record received on:
Date of Spay or Neuter:
Photo received on:

The pet owner will be required to designate an alternate responsible party for the care of the pet if the health or safety of the pet is threatened by the death or incapacity of the pet owner, or by other factors that render the pet owner unable to care for the pet

Name of Alternate Responsible Party:
Alternate Party Contact Information:

Attach Photo Here

