



1630 Moores Street
Leeds, Alabama 35094
Tel: 205-699-6223
Fax: 205-699-2208

LHA PET APPLICATION

Applicant (Tenant) Name: _____

Address: _____

Responsible Parties: The following persons are designated by me to be contacted in the event that I am unable to care for my pet(s).

Name Address Phone Number

Name Address Phone Number

I have read the LHA Pet and Assistive Animal Ownership Policy and understand the requirements for keeping a pet in my unit. The following is the information required by LHA to process my application for pet ownership.

I request authorization to keep the following small pet(s):

Caged animal(s) Type: _____ Number: _____

Aquarium Type: _____ Number: _____

I request authorization to keep the following large pet (All Dogs and Cats):

Name of Pet: _____ Type: _____

Breed: _____ Weight at Maturity: _____

Required attachments for dogs and cats:

Proof dog / cat has been spayed / neutered

Proof of all inoculations required

Pet deposit of \$300

Photograph of dog or cat

Signature of Resident

Date

Making a difference, one family at a time

Board Approved 05.2022