

**MAXIM II CONDOMINIUM ASSOCIATION
PET APPLICATION / REGISTRATION FORM**

Name of pet owner: _____

Unit number: _____

Home phone: _____ Work Phone: _____

Pet Information (please list all pets separately)

Pet's Name	Type/Breed	Age	License or ID #

Veterinarian: _____

Address: _____ Phone: _____

Pet References (please list references that know you and your pet(s) and who would be willing to discuss your pet with us. You may list people such as your neighbors, veterinarian, pet-sitters, or dog trainer as appropriate)

Name: _____ Phone: _____

Name: _____ Phone: _____

Pet's Emergency Caretaker:

Name: _____ Phone: _____

I have read and understand the Association's rules pertaining to pets. I and the members of my household and any guests promise to fully comply.

Signature of pet owner: _____ Date: _____

Signature of property owner: _____ Date: _____
(if pet owner is a renter)

Board Approval: _____ Date: _____