501(c)3 ANIMAL RESCUE GROUP
APPLICATION AND ADOPTION INSTRUCTIONS

All 501(c)3 Animal Rescue Groups wishing to adopt animals from the Animal Care Services Bureau will first apply with the Bureau. The requirements for a 501(c)3 Animal Rescue Group are as follows:

- An officer of the Animal Rescue Group must completely fill out the application.
- Provide proof they are an officer of the Animal Rescue Group.
- Provide a copy of their IRS paperwork showing they are a 501(c)3.
- Designate two of their members that will conduct all adoptions, providing required information in application.
- Pay all fees for adoption, shots and spay or neuter of the animal.
- Provide the location that each animal being adopted is going to be housed at the time of the adoption.
- Provide the location that each animal being adopted is going to be housed at the time of the adoption.
- All adopted animals will be picked up from the veterinarian's office on the date specified after the animal has been spayed or neutered.
- An animal welfare official has the right to inspect any kennel or foster location(s) unannounced at reasonable times.

Once the Bureau has received your application it will be reviewed for proper qualifications and documentation. You will receive a letter notifying you that your organization has been approved and can now adopt animals under the Bureau's 501(c)3 Adoption Program or explaining why your organization has not been approved. To adopt an animal your organization’s representatives must follow the following procedures:

- On the animals evaluation date you must request to adopt the animal from the spcaLA.
- If the animal is not being taken or adopted by the spcaLA your representative can then request the animal under the Bureau's 501(c)3 Adoption Program.
- Animals that are a danger to the public will not be adopted as allowed by law.
- The adoption will be completed with the Bureau's staff at the time of request.
- An appointment will be made to have the animal spayed or neutered (altered) at our Veterinarian. The Bureau will transport the animal to the veterinarian's office' for the altering.
- The animal shall be picked up by the 501(c)3 Animal Rescue Group on the date specified after the animal has been altered. In the event the animal cannot be altered at the time of adoption for medical reasons. It will be returned on the date specified by the veterinarian for altering. Failing to complete having an animal altered will result in the 501(c)3 Animal Rescue Group be excluded from adopting animals through the Bureau's 501(c)3 Adoption Program.
501(c)3 ANIMAL RESCUE GROUP
APPLICATION FORM

Group Name: _______________________________ 501(c)3 ID#: __________________________ (attach copy)
Address: _________________________ City: _______________________State: ______ Zip: ______________
Telephone #: ___________________Fax #: _____________________ Website: _________________________
Primary Contact Person: ____________________________ Email: ___________________________________

Type of Animals Under Jurisdiction of Corporation
Species/Breeds: ____________________________________________________________________________

Kennel Address (where animals are housed, if different from above)
Address: _________________________ City: _______________________State: ______ Zip: ______________

Total # of Runs Indoor: ____________ Outdoor: ___________ Covered: ___________ Uncovered: __________

• How many animals are currently housed at this location: _______________________________________
• How many animals are currently housed in foster homes: _______________________________________
• How many animals are currently at other locations: _______________________________________

If you use foster homes; list names, addresses, phone number, and number of animals at each location on attached form.

Do you have a kennel permit to house multiple animals at this location? Yes or No
If yes, what agency, city or county issued the permit? _________________________________________
Permit number: __________________ Expiration date: ________________ (attach copy of permit)

Veterinarian Used for Animal Care
Name: _______________________________________ Clinic: _______________________________________
Address: _________________________ City: _______________________State: ______ Zip: ______________
Telephone #: ___________________ Fax #: _____________________ Website: _________________________

Authorized Personnel (to approve pick-up on behalf of agency)
1. Name: ___________________________________ Drivers License/ID # __________________
   Address: _________________________ City: _______________________State: _____ Zip: _____________
   Telephone #: __________________________

2. Name: ___________________________________ Drivers License/ID # __________________
   Address: _________________________ City: _______________________State: _____ Zip: _____________
   Telephone #: __________________________

I understand that an animal welfare official has the right to inspect and/or visit the foster/kennel location(s) unannounced at reasonable times. I certify that all information provided is true, complete, and correct. I will assure the humane treatment of all animals released to me or my designee and agree to remain in compliance with local and state laws as they pertain to code compliance and humane animal care.

Signature: __________________________________ Date: ______________________________
Print Name: ______________________________ Title: _______________________________

For Office Use Only
Date Received: Control #: Date Reviewed:
Reviewed By:
501(c)3 Received: Reference Check Completed:
Property Inspection Completed: Results:
IMPORTANT: THIS DOCUMENT RELIEVES THE CITY OF LONG BEACH, ANIMAL CARE SERVICES BUREAU, AND THEIR OFFICERS, EMPLOYEES AND AGENTS FROM LIABILITY RESULTING FROM PERSONAL INJURY, WRONGFUL DEATH, AND PROPERTY DAMAGE CAUSED BY THIS ANIMAL. I HAVE READ THIS DOCUMENT, UNDERSTAND IT, AND SIGN VOLUNTARILY.

DATE: __________________           _________________________________________  Signature

_________________________________________  Print name

DATE: __________________           _________________________________________  Title

_________________________________________  Signature

_________________________________________  Print name

_________________________________________  Title

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### Foster Home(s) / Other Housing

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<th>Name</th>
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**Office Use Only**
501(c)3 ANIMAL RESCUE GROUP
APPLICATION FORM

RECORD OF TRANSFER

Transfer Permit Number: ___________________ Date of Transfer/Sale: ______________

Transferring Owner Information

Name: __________________________________________________________________________
Address: __________________________________________________________________________
City: __________________________ State: ________ Zip: __________________________
Telephone #: (______) ______-_________   Alt Phone Number: (______) ______-_________

New Owner Information

Name: __________________________________________________________________________
Address: __________________________________________________________________________
City: __________________________ State: ________ Zip: __________________________
Telephone #: (______) ______-_________   Alt Phone Number: (______) ______-_________

Animal Information

Type: ________  Sex: ________  Spayed or Neutered? Yes ____ No ____ (if altered, provide proof)
Breed: ___________________________  Birth Date: ___________________________
Color: ___________________________  Microchip #: ___________________________

Immunization History (if given by licensed veterinarian please attach copies):
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

All dogs aged 4 month or older must have a valid dog license issued by the City of Long Beach. In order to receive a dog license, a valid certificate of rabies vaccination must be submitted along with the required dog licensing fee.

All cats residing within the City of Long Beach are required to be spayed or neutered.

(Copies to be given to new owner and City of Long Beach Animal Care Services)