



CITY OF LONG BEACH

DEPARTMENT OF HEALTH AND HUMAN SERVICES



7700 E. Spring St. « Long Beach, CA 90815 « (562) 570-7387 * FAX (562) 570-3053

Animal Care Services Bureau

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.
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- 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:	



501(c)3 ANIMAL RESCUE GROUP APPLICATION FORM



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

Title

DATE: _____

Signature

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:	



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.