EDGECOMBE COUNTY ANIMAL SERVICES

REGISTRATION FORM

INHERENTLY DANGEROUS ANIMAL

\*Please complete for EACH animal\*

Date of Application:

**Registration Type**

Individual Owner [ ]

Corporation\* [ ]

Other organization type\*\* [ ]

Organization type if not corporation: Click or tap here to enter text.

\*If corporation, attach names and addresses of officers, state of incorporation, date of incorporation and address of the principal officer

\*\*If organization other than corporation, attach name, location of office(s), names and addresses of principal officers, directors, trustees, managing officials and/or partners

Name Click or tap here to enter text.:

Address: Click or tap here to enter text.

City/State/Zip: Click or tap here to enter text.

Phone #: Click or tap here to enter text. Email: Click or tap here to enter text.

Address where animal is kept: Click or tap here to enter text.

City/State/Zip: Click or tap here to enter text.

Owner’s purpose in keeping the animal: Click or tap here to enter text.

Animal place of origin: Click or tap here to enter text.

Method of acquisition (gift, purchase, etc.): Click or tap here to enter text.

Description of animal including size weight, distinctive markings, species (please attach photo taken within 7 days of this application): Click or tap here to enter text.

List any previous incidents involving this animal, including escapes, injury to persons or property, etc.: Click or tap here to enter text.

Description of the method, materials and square footage of facility for animal’s confinement: Click or tap here to enter text.

Name and contact information of treating veterinarian: Click or tap here to enter text.

List of tranquilizing equipment, chemicals and instruments of **destruction for facility**: Click or tap here to enter text.

\*\*Please attach copies of all state and federal permits and licenses required for animal described above\*\*

\*\*Please attach proof of owner’s ability to respond in damages for bodily injury to or death of any person or for damage to property owned by any other person that may result from the ownership, keeping or maintenance of such animal, which shall be given by filing a certificate of insurance from an insurance company authorized to do business in the state stating that the applicant is, at the time of application, insured by a policy of $100,000.00 combined single limit liability for bodily injury and property damage, and which will provide that no cancellation of the insurance will be made unless ten days' written notice is first given to the Animal Services

Please mail completed form and required documents to Edgecombe County Animal Services c/o Edgecombe County Sheriff’s Office, 3005 Anaconda Rd., Tarboro, NC, 27886 or drop off at the Edgecombe County Animal Shelter, 2909 N Main St, Tarboro, between the hours of 1:30-4:30 Monday through Friday.