

Lake Breeze Condominium

c/o Woodbridge Group ♦ P.O. Box 237, Pittsford, NY 14534 ♦ 585-385-3331

VISITING DOG REQUEST FORM

NAME: _____

UNIT NUMBER: _____

PHONE NUMBER: _____

ALTERNATE PHONE NUMBER: _____

TYPE OF DOG – BREED(S): _____

SIZE & WEIGHT OF DOG: _____

DATE OF LAST RABIES SHOT: _____

HAS THE DOG EVER BITTEN SOMEONE BEFORE, IF YES, PLEASE EXPLAIN: _____

START DATE OF VISIT: _____ END DATE OF VISIT: _____

IF THE BOARD APPROVES THIS REQUEST, I UNDERSTAND THAT THEY CAN REVOKE THAT APPROVAL AT ANY TIME IF THE DOG BECOMES A NUISANCE OR THREAT TO ANY HOMEOWNER OR CONDOMINIUM VISITOR AND I WILL BE REQUIRED TO REMOVE THE DOG FROM THE PREMISES IMMEDIATELY. I ALSO UNDERSTAND THAT I AM RESPONSIBLE FOR ANY DAMAGE THAT THE VISITING DOG CAUSES. I HAVE READ AND ACKNOWLEDGE THE LAKE BREEZE CONDOMINIUM RULES ABOUT VISITING DOGS.

HOMEOWNER SIGNATURE

DATE