



FOSTER HOME/ANIMAL SHELTER AGENT AGREEMENT

Georgia Department of Agriculture (Hereinafter "GDA")

[1] "Animal Shelter Agent" is used as stated in the "Rules of "GDA" 40-13-13-.02(6) Animal Protection"

[2]"Animal Shelter"; "Foster Home"; "Pet"; "Rescue Group" are used as defined in the "Rules of "GDA" 40-13-13-.01" Animal Protection"

"GDA" Licensed Animal Shelter (print) Glynn County Animal Control, Glynn County Georgia

agrees to allow (print) _____ to serve as their

Foster Home/Animal Shelter Agent under their "GDA" Animal Shelter License # 33-331486;

"Foster Home/Animal Shelter Agent – Agreement" Effective Date _____;

[1] This agreement expires twelve months from the effective date and a new agreement must be signed; [2] This agreement must be on file at the above Animal Shelter's licensed address and a copy on file at the Foster Home/Animal Shelter Agent's address; [3] All pets will remain the property of the above licensed Animal Shelter until an outgoing pet transaction is completed. While property of the above licensed Animal Shelter all pets must be returned to the Animal Shelter upon request; [4] The Foster Home/Animal Shelter Agent agrees to have License Holder approval prior to rescuing any pet; [5] The Foster Home/Animal Shelter Agent agrees to a pre-approval inspection and periodic inspections from authorized Animal Shelter personnel and when necessary "GDA" personnel; [6] The Foster Home/Animal Shelter Agent agrees to comply with all the following that are applicable; {A} "Bird Dealer Licensing Act" O.C.G.A. 4-10-1; {B} "Rules of "GDA" Chapter 40-13-12 Bird Dealer Licensing"; {C} "Georgia Animal Protection Act" O.C.G.A. 4-11-1; {D} "Rules of "GDA" Chapter 40-13-13 Animal Protection"; {E} Including but not limited to the following:

{1} Adequate food; {2} Adequate water; {3} Adequate temperature control; {4} Adequate ventilation; {5} Proper animal health care; {6} Classification and separation; {7} Housekeeping; {8} Pest control; {9} Sanitation of the primary enclosure; {10} Shelter from rain, snow, cold, sunlight; {11} Space requirement; {12} Structural strength; {13} Waste disposal.

PLEASE PRINT THE FOLLOWING FOSTER HOME/ANIMAL SHELTER AGENT INFORMATION:

Physical Address _____ County _____

City _____ State _____ Zip _____

THE FOSTER HOME/ANIMAL SHELTER AGENT AGREES TO COMPLY WITH ALL REQUIREMENTS:

Foster Home/Animal Shelter Agent (signature) _____

License Holder (signature) Tiffani Hill (print) Tiffani Hill, Manager

TO TERMINATE THIS AGREEMENT PRIOR TO THE EXPIRATION DATE PLEASE COMPLETE THE FOLLOWING:

Foster Home/Animal Shelter Agent (signature) _____ date _____

License Holder (signature) _____ date _____