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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>CS – Cat Spay Assistance Application</b>                              | <b>Community<br/>Services</b> |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Cat Spay Assistance Application</b><br><b><i>Female Cats Only</i></b> |                               |
| Introduction                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                          | SECTION 1                     |
| <p><b>What is this program?</b><br/>         The City offers spay services (at a cost of \$140.00) for cats, older than 4 months, owned by low-income individuals and families. Surgeries are performed by Dr. Heather Hillier at Humane Services Animal Care and Adoption Center, 81 Higgins Line.</p> <p><b>Who is eligible?</b><br/>         Any resident of St. John's following into either of the following income categories:</p> <ul style="list-style-type: none"> <li>A single net income of \$25,000.00 or less</li> <li>A combined family net income of \$40,000.00 or less</li> </ul> <p><b>What documents are required?</b></p> <ol style="list-style-type: none"> <li>Photo identification confirming your identity and St. John's residency</li> <li>Proof of income – only the following will be accepted:             <ul style="list-style-type: none"> <li>Last years tax assessment (for all household members) <b>OR</b></li> <li>A letter of confirmation that you are receiving the Guaranteed Income Supplement</li> </ul> </li> </ol> <p><b>How are the appointments scheduled?</b><br/>         Appointments will be made for approved application, once payment of \$140.00 has been received.</p> <ul style="list-style-type: none"> <li>Surgeries are booked Tuesday to Friday; patients must be dropped off between 8:00-8:30am and picked up that afternoon between 3:00-3:45pm.</li> <li>Patients are discharged with homecare instructions, pain relief, license and Pet Insurance (30 day free trial).</li> </ul> |                                                                          |                               |
| Owner Information                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                          | SECTION 2                     |
| Name _____<br>Address _____<br>City/Town _____ Postal Code _____<br>Primary Phone Number _____ Alternate _____<br>Email _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                          |                               |
| Animal Information – Only 1 cat per application                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                          | SECTION 3                     |
| Name _____ Colour _____ Age _____ - _____<br><input type="radio"/> Indoor only <b>or</b> <input type="radio"/> Indoor/Outdoor <input type="radio"/> Short Hair <input type="radio"/> Long Hair <b>or</b> Breed _____<br>Has your cat had kittens: <input type="radio"/> No <input type="radio"/> Yes    Date of last litter _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                          |                               |

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| <b>CS – Cat Spay Assistance Application</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Community Services</b> |
| Animal Information – Only 1 cat per application <i>continued</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>SECTION 4</b>          |
| Does your cat have any known medical conditions?: <input type="radio"/> No <input type="radio"/> Yes (please provide details:)                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                           |
| Optional Microchipping – Additional \$20.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>SECTION 5</b>          |
| <ul style="list-style-type: none"> <li>A microchip is a tiny device, (the size of a grain of rice), that is implanted under the skin between the shoulder blades and can be done while your pet is asleep for their surgery.</li> <li>Once implanted, each chip has a unique identification number that links your pet to the information you provide today and can be updated anytime.</li> <li>It is permanent form of identification that can be read with a universal scanner. It is NOT a GPS.</li> </ul>                                                                                   |                           |
| Would you like to add a microchip to your pet's surgery?: <input type="radio"/> Yes <input type="radio"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                           |
| Application Declaration                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>SECTION 6</b>          |
| I certify that the information contained in this application is true to the best of my knowledge, information and belief. I further acknowledge, that should I be approved, I will pay the reduced fee of \$140.00 (+ \$20.00 if microchipping) tax included.                                                                                                                                                                                                                                                                                                                                    |                           |
| Signature _____ Date _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                           |
| Privacy Statement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>SECTION 7</b>          |
| Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed for the purpose of program approval. Questions about the collection and use of the information may be directed to Manager of Humane Services, <a href="mailto:humaneservices@stjohns.ca">humaneservices@stjohns.ca</a> .                                                                                                                                                                                                                        |                           |
| Supporting Documentation – Office Confirmation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>SECTION 8</b>          |
| Confirmation of residence/photo id<br>Confirmation of income (for all household members)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                           |
| Approved _____ Date _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                           |
| Payment (date) _____ Appointment (date) _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                           |
| <p>This completed form, along with supporting documentation can be submitted:</p> <ul style="list-style-type: none"> <li>In person - Humane Services at 81 Higgins Line during our open hours: Tuesday to Friday 12:00 – 4:00pm, or Saturday &amp; Sunday 3:00 – 5:00pm</li> <li>Mail: Humane Services PO Box 908, St. John's NL A1C 5M2</li> </ul> <p>Contact: Phone 1-709-576-6126 or email: <a href="mailto:humaneservices@stjohns.ca">humaneservices@stjohns.ca</a></p> <p>Staff will contact you once your application has been processed and/or as appointment times become available.</p> |                           |