

Peoples Senior Living, LLC Pet Agreement

The Resident and Peoples Senior Living have entered into the Agreement. The Resident desires to keep a pet in the Apartment and Peoples Senior Living consents on the following terms and conditions:

- The Resident agrees to pay the sum of <u>\$500.00</u> as a non-refundable pet fee for, but not limited to, common area carpet cleaning, additional landscaping upkeep and pest control, sanitation, and odor control, etc. Should the pet cause damage to the building/apt, residents are fully responsible for cost of repair/replacement. We encourage renters' insurance with pet policy rider to cover such costs.
- 2. Resident must have a 3-person deep pet emergency guarantor. The first person must sign the form, agreeing to be financially, medically, and physically responsible for the pet. The second and third person are emergency back-ups.
- 3. Only one (1) pet shall be allowed in the Apartment to include a dog, a cat, a bird, fish, at Peoples Senior Living's discretion and must be under 25 lbs. No illegal animals, snakes, rabbits, or rodents allowed. All other pets are not accepted at the Community. The Resident shall maintain, and provide evidence to Peoples Senior Living of, current and proper immunizations and licenses of the pet and maintain proper flea/pest treatment + proof that pet is flea/pest-free by staff inspection. Resident shall provide Peoples Senior Living with current evidence that the pet has received a recent, satisfactory examination by a veterinarian which states the pet is free of communicable/spreadable diseases. This must be completed prior to the pet moving into the Apartment. Records include animal license, RFI tag (if applicable), immunizations by the end of each January.
- 4. Pets shall always be accompanied by resident and under leash outside of a resident apartment. No pet shall be allowed in any part of the interior of the Community other than the Apartment unless allowed by Peoples Senior Living or for taking the pet outside for a walk and then back to the Apartment. The Resident shall ensure pet is not causing noise disturbances and prevent the pet from causing such disturbance which would constitute a breach of quiet enjoyment of others. Should the pet cause a regular noise disturbance, resident agrees to re-home the pet. When the pet is not within the Apartment, it will be always under physical restraint or leash, held within or less than 2 feet of the owner's body, and under immediate supervision and responsibility of the Resident.
- 5. The Resident shall ensure proper maintenance and upkeep of all equipment, cages, tanks, litter boxes, etc. in addition to conducting weekly/daily containment and disposal of animal waste. Staff do not

provide any type of pet care. The Resident shall prevent animal odors, dander, and fur from interfering with the daily operations of the community and with the health and safety of the residents, staff, and guests. The Resident shall only use designated outside areas for his/her pet's excrement, never allowed inside. The Resident agrees to properly remove and dispose of all his/her pet's excrement at the time of occurrence. Trash bins are located outside for excrement. Please do not use an inside trash bin, so we can prevent smells. The Manager establishes and approves these designated outside areas;

- 6. Resident must be assessed by nurse to be able to properly care for the pet that is safe and hygienic, if resident is unable to pass this exam, the pet will not be allowed. This exam may be conducted at any time if there is concern a resident is unable to properly care for the pet.
- 7. Visiting pets: Provide proof of annual veterinarian health care records to the front desk. No visiting pets will be able to stay overnight.
- 8. The Resident shall be held liable for any, and all, bodily injury, or damage to the premises by the pet.
- 9. A breach of conditions shall allow Peoples Senior Living to terminate this Agreement, at Peoples Senior Living's option, and the pet/animal must be removed from the premises.

DESCRIPTION OF PET:

Type of Pet:	Dog	Cat	Bird	Other-Please identify:		
Pet's Name:						
Physical description of Pet: (Please include breed, age, color, etc.)						
Animal License Number:						
License Expiration Date:						
Date of Last Immunization and Required Shots:						
Veterinarian Name:						
Veterinarian Phone N	Number:				-	

ACKNOWLEDGEMENT

I/We have read, understand, and agree to the terms of the Agreement and understand that it is a complete expression of this Agreement. I/We understand that there are no verbal promises or understandings pertaining to this contract other than those specified in this Agreement. I/We agree that any amendments or modifications to this Agreement must be in writing and signed by Peoples Senior Living and me/us. I/We acknowledge receiving copies of this Agreement, and of all addenda of the Agreement. I/We agree to abide by the terms and requirements that are presented therein. Date:_____

Resident/responsible name:	Signature:	
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2 nd Person Name:	Signature:	
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Cascade Senior Living Services	AGREEMENT	REV 4/25/2024



Affidavit of Pet Owner's Emergency Absence Agreement

In an emergency, I understand that Peoples Senior Living staff will contact the person(s) listed below for the care of my pet in my absence. Should those people be unavailable, I agree to my pet being removed from my apartment and taken to a boarding facility or animal shelter until other arrangements can be made. I understand and agree that I will accept full responsibility for any charges resulting from this action.

Signature/name of Resident: _____ Date:

Resident must have a 3-person deep pet emergency guarantor. The first person must sign the form, agreeing to be financially, medically, and physically responsible for the pet. The second and third person are emergency back-ups.

I agree to be a Guarantor responsible party for this resident's pet fully, to include: financial, medical, and physical care and upkeep of the pet.

Name: _____

Address: _____

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I agree to he an	emergency nack-lir	ι το τακέ της ηστι	n case of emergency.
	Chick Schey Buck up	f to take the pet i	in case of entergency.

Name:

Address:

Name: _____

Address:			

Phone:

Phone:_____

Phone:



Veterinarian Affidavit of Health

DESCRIPTION	OF PET:

Type of Pet:	Dog	Cat	Bird	Other-Please identify:	<u>.</u>	
Pet's Name:						
Physical descriptio	Physical description of Pet: (Please include breed, age, color, etc.)					
License Expiration	Date:					
Date of Last Immunization and Required Shots:						
Next due date for immunizations/shots:						
Veterinarian Name:						
Veterinarian Phone Number:						
Veterinarian Addres	s:				_	

I certify, as an accredited veterinarian that the animals described on this certificate have been inspected by me and that they are not showing signs of infectious, contagious and/or communicable disease. The vaccinations and results of tests are indicated on the certificate. To the best of my knowledge, the animals listed on this certificate meet the state and federal interstate requirements. No further warranty is made or implied.

Signed by Dr. _____ Dated: _____