

**STERILIZATION AGREEMENT
WYTHE COUNTY ANIMAL SHELTER**



Return to: Wythe County Animal Shelter
Administration Building
340 S. 6th Street
Wytheville, VA 24382
(276) 228-6003

DESCRIPTION OF ADOPTED PET:

Sex: M F Approximate Age: _____ Breed: _____
Color: _____ Approximate Weight: _____ Required Sterilization Date: _____

NEW OWNER INFORMATION:

Name:

_____ (last) _____ (first) _____ (middle)

Physical Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell/Other: _____

AGREEMENT:

THE STERILIZATION OF AN ADOPTED DOG BY A LICENSED VETERINARIAN IS REQUIRED WITHIN 30 DAY OF THE ADOPTION OR WITHIN 30 DAYS OF THE DOG REACHING 6 MONTHS OF AGE AS STATED IN VIRGINIA CODE 3.1-796.126:1. ANY PERSON WHO VIOLATES THIS ARTICLE IS SUBJECT TO A CIVIL PENALTY AND THE NEW OWNER SHALL COMPLY WITH THE PROVISIONS OF THIS ARTICLE.

Each new owner who signs a sterilization agreement shall, WITHIN 7 DAYS OF THE STERILIZATION, cause to be DELIVERED OR MAILED TO THE RELEASING AGENCY WRITTEN CONFIRMATION SIGNED BY THE VETERINARIAN WHO PERFORMED THE STERILIZATION. The confirmation shall briefly describe the dog; include the new owner's name and address; certify that the sterilization was performed; and specify the date of the procedure. Any person who violates this section shall be subject to A CIVIL PENALTY NOT TO EXCEED \$150.00. If the adopted dog is lost, stolen or dies before the animal is sterilized and before the date by which the dog is required to be sterilized, the new owner shall, within 7 days of the animal's disappearance or death, notify the releasing agency of the animal's disappearance or death. Any person who violates this section shall be subject to a civil penalty not to exceed \$25.00.

Releasing Agency's Signature: _____ Date: _____

BEFORE SIGNING THIS AGREEMENT I CERTIFY THAT I HAVE NEVER BEEN CONVICTED OF ANIMAL CRUELTY, NEGLECT, OR ABANDONMENT AND WILL UPDATE CHANGES AS THEY OCCUR.

New Owner's Signature: _____ Date: _____

DVM – VMD USE ONLY

NAME OF CLINIC: _____ PHONE: _____

I Neutered / Spayed the above animal on this date: _____

SIGNED: _____