



San Luis Obispo County  
Animal Services Division  
PO Box 4110  
885 Oklahoma Ave  
San Luis Obispo, CA 93406  
(805)781-4400 / fax 781-1065



## Animal Rescue Request

|                                   |   |                         |             |
|-----------------------------------|---|-------------------------|-------------|
| Animal Information                | Animal ID# _____  | Availability Date _____ |             |
|                                   | Species _____   | Breed _____             | Color _____ |
|                                   | Age _____   | Sex _____               |             |
| Rescuing Organization Information | Organization Name _____                                       |                         |             |
|                                   | Address _____   |                         |             |
|                                   | City _____  | County _____            | State _____ |
|                                   | Zip _____   | Phone _____             |             |
|                                   | 501(c)3 Number _____  |                         |             |
|                                   | Person authorized to transport from Animal Services _____     |                         |             |
| Animal Holding Information        | Person or Business to which animal is being transported _____ |                         |             |
|                                   | Address _____   |                         |             |
|                                   | City _____  | County _____            | State _____ |
|                                   | Zip _____   | Phone _____             |             |

I hereby attest, under penalty of perjury, that the organizations or persons named above have not been, and are not currently subject to, prosecution for violation of any local, state, or federal code pertaining to the care or management of animals, nor any code pertaining to the operation of an animal related business. Furthermore, I attest that the Rescuing Organization is a non-profit operation and the IRS 501(c)3 number listed is current and in good standing.

\_\_\_\_\_  
Signature (facsimile to be accepted as original)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Approved By

\_\_\_\_\_  
Date