

## Sterilization Agreement

Palacios SPCA

Palacios, Texas 77465

Date \_\_\_\_\_ ID# \_\_\_\_\_

Sterilization Completion Date \_\_\_\_\_

The above date should be the 30<sup>th</sup> day for an adopted adult.

The above date should be the 30<sup>th</sup> day after a specified date estimated that an infant female becomes of age or an infant male becomes of age.

Animal Description: Dog \_\_\_\_\_ Cat \_\_\_\_\_ Kitten \_\_\_\_\_ Pup \_\_\_\_\_

Breed \_\_\_\_\_ Gender \_\_\_\_\_ Color \_\_\_\_\_

\*\* Sterilization of the above animal is required under chapter 328, Health and Safety Code, and a violation of this chapter is a criminal offense punishable as a Class C misdemeanor.

\*\* Pursuant to recently enacted Section 328.0055, the State Board of Veterinary Medical Examiners has enacted a rule requiring the new owner of an animal sterilized under Chapter 328 to identify that the animal has been sterilized by a microchip or tattoo.

\*\* Chapter 328 provides that an animal shelter may reclaim the animal from the adoptor if the adoptor does not fulfill the obligations of the adoption agreement and further provides that if the owner fails to comply with the sterilization agreement it is an offense punishable as a Class C misdemeanor ( fine of up to \$500 ).

I have read and understand this sterilization agreement. I understand that on or before the sterilization completion date listed (on page 1) I shall fulfill the obligations of this agreement. I understand that I will be cited and legal actions will be taken against me if I do not comply with the sterilization agreement which is an offense punishable as a class C misdemeanor ( fine of up to \$500 ).

New Owner Name (Printed) \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Signature \_\_\_\_\_

(Do Not Write Below This Line) \_\_\_\_\_

Releasing Agency Signature \_\_\_\_\_