

Stone Ridge Association
Pet Registration

Date: _____

Owner Name: _____

Home Phone (____) _____ Work (____) _____

Pet Name: _____ Breed: _____

Description: _____ Weight: _____

Pet Age: _____ Years with owner: _____ Obedience Trained: _____

Is this the only pet you keep at your home? Yes ___ No ___

If no, include a separate registration for each pet.

Veterinarian Name: _____

Address: _____ Office Phone: _____

Is your pet licensed with the municipality? _____

A photograph of your pet is required with this registration for purposes of identification.

All dogs must be leashed, and under the complete control of a responsible handler at all times whenever in a limited common area or master common areas.

The immediate cleanup of pet waste is required, and must be bagged and disposed of in compliance with City ordinances for health and safety.

The owner acknowledges and agrees to comply with the rules as outlined in the Condominium Bylaws; It is further understood and agreed that failure to comply with these rules can result in penalties up to and including fines and the removal of the pet within the Condominium Community.

Owner's Signature

Date