

Loudoun County Department of Animal Services

39820 Charles Town Pike
Waterford, VA 20197
703-777-0406 (Office)
540-882-3984 (Fax)



SPAY/NEUTER APPLICATION

The CARE Program provides spay/neuter vouchers for residents of Loudoun County who request assistance and are able to demonstrate that they are otherwise unable to afford the cost of the procedure for their companion animals. If you would like to be considered for spay/neuter assistance, please complete the following application and submit all required documentation.

APPLICATION PROCESS

1. Your application must be complete and must include required documentation regarding monthly total household income and monthly rent or mortgage expense. Applications will be reviewed to verify eligibility.
2. Please return your application to Loudoun County Department of Animal Services for consideration.
3. The application will be reviewed for eligibility.
4. You will be notified when your application has been processed.
5. An in home consultation will be scheduled with eligible applicants.
6. You will be notified of final approval.

ELIGIBILITY REQUIREMENTS

1. Applicants must reside in Loudoun County, Virginia.
2. All applications must be accompanied by proof of income and monthly rent or mortgage amount. Applications will be reviewed on a case by case basis to verify that assistance warranted.
3. No resident of the household under consideration for CARE benefits may have been convicted of violations regarding the care of animals.
4. Rabies vaccinations are required by law, for dogs and cats over 4 months of age. Routine vaccinations are not generally covered by CARE and may be required by the veterinarian before the spay/neuter procedure. Information regarding low cost vaccination clinics is available on our website, www.loudoun.gov/animals.
5. Dogs must have a current dog license.
6. All dogs, cats and rabbits under considerations for CARE must be spayed or neutered within 30 days of acceptance.
7. CARE assistance is provided for animals that are in the home at time of first application for assistance. Obtaining additional animals after acceptance into the program will impact eligibility.

SPAY/NEUTER APPOINTMENTS

1. CARE recipients are responsible for scheduling the spay/neuter procedure with one of our CARE participating veterinarians. When making the appointment, indicate that a CARE voucher will be sent for the procedure. Vaccinations are not included in CARE spay/neuter vouchers.
2. CARE recipients must contact Animal Services to provide advance notice that the spay/neuter procedure has been scheduled.
3. Animal Services will send a voucher outlining approved services to the veterinarian prior to all spay/neuter appointments.
4. CARE recipients are responsible for transporting their pet to and from the appointment.

PLEASE KEEP THIS PAGE FOR YOUR RECORDS



Spay/Neuter Application

Full Name _____

Address _____

Primary phone #: _____ Alternate phone #: _____

Driver's license #: _____

Date of birth: _____

Financial Information

Total household gross income per month: _____
(Total monthly earnings; please include total financial aid, child support for all contributing members in household)
***Proof of income required with your application.**

Monthly rent or mortgage: _____
***Please include a copy of mortgage statement or lease with your application.**

Number of adults in the household: _____ Children: _____

Pet Information

How many pets in the household? _____

Please complete one section per animal for which spay/neuter is requested (print additional sections if needed):

Circle Type of Pet: Dog Cat Other

Name of Pet: _____ Breed: _____

Age: _____ Sex: _____ Color: _____

Is the pet primarily: inside: _____ outside: _____

Type of confinement: _____

I certify that the above information is accurate and true. I also certify that the animal(s) listed in the application belong to me.
I certify that neither I, nor any members of my household have ever been convicted of any violations regarding animal care.

Applicant signature

Date
