**(Authorization to Obtain Animals - Record Keeping Form)**

Georgia Department of Agriculture (“GDA”)

Enter The Following Requested Information In The Fillable Space Provided:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of the establishment with a  GDA “Animal Shelter License”  that is releasing the animal(s): | | | | | | | |  | | | | | | | License # | | |  |
| Name of the representative of  the establishment releasing the  animal(s):  s | | | | | | |  | | | | | | | | | | | |
| Name of the establishment with a  GDA “Animal Shelter License”  that is obtaining the animal(s): | | | | | | | |  | | | | | | | License # | | |  |
| Name of the authorizing corporate  officers signing this document: | | | | | | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| Name of the authorized person  obtaining the animal(s) | | | | | |  | | | | | | | | | | | | |
| Physical Address: | |  | | | | | | | | | | | | | | | | |
| City: |  | | | | | | | | | | | | State: |  | | Zip: |  | |
| Phone Number: | | | |  | | | | | | Email: | |  | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| This document may be terminated at any time for any reason by either party and must state “the authorized persons privileges have been revoked”. If the establishment releasing the animal(s) initiates the termination they must notify the establishment obtaining the animal(s) in writing no later than the next business day. If the establishment obtaining the animal(s) initiates the termination they must notify the establishment releasing the animal(s) in writing no later than the next business day. The notification may be by email; however, the authorized senders’ signature and printed name must be on the notification. This document must be kept on file at the establishment releasing the animal(s) and must be made readily available for inspection by GDA during normal business hours. | | | | | | | | | | | | | | | | | | |
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| Please read “O.C.G.A § 4-11-7 in the “Georgia Animal Protection Act” for possible action to be taken in the event of a non-compliance violation by any party involved in this transaction. | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| As a corporate office of the above-named establishment obtaining the animal(s)I attest that the above-named person is authorized to obtain and transport the animal(s). I furthermore attest that while in possession of the obtained animal(s) the authorized person will comply with all provisions of the “Georgia Animal Protection Act” §O.C.G.A. 4-11-1 and the rules and regulations thereunder (Rules of Georgia Department of Agriculture Chapter 40-13-13 Animal Protection). | | | | | | | | | | | | | | | | | | |
| Signature: Corporate officer of  The GDA licensed establishment  obtaining the animal(s): | | | | | |  | | | | | | | | | | | | |
| Signature: Authorized person  Obtaining the animal(s): | | | | |  | | | | | | | | | | | | | |
| Signature: Representative of the  GDA licensed establishment that  Is releasing the animal(s): | | | | | |  | | | | | | | | | | | | |
| Authorization Date: | | |  | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |