

**PARKFAIRFAX CONDOMINIUM ASSOCIATION
ADDITIONAL PET APPLICATION**

Name: _____ Phone# :() _____

Work# :() _____

Address: _____

Unit Owner Name and Address: _____
(if different than above)

I seek approval for an additional pet in my home.

I presently have: _____
(Number and type of pets)

I wish to add: _____
(Name and type of pet)

Current City of Alexandria Registration # :(Cats/Dogs) _____
(copy of the city of Alexandria registration form must be attached)

Date and registration of rabies inoculation: (Cats/Dogs) _____

No pet (cat or dog) will be permitted on the Common or Limited Elements unless carried or restrained on a leash and under the direct control of a responsible person.

By my signature below, I affirm that I will abide by the decision of the Board of Directors. I further confirm that such additional pets will not be used for commercial breeding purposes and that they are properly registered at the Unit Owners Association. I acknowledge and will abide by the pet policies set forth in Parkfairfax Condominium Unit Owner's Association Policy Resolution Number Seven, related to the keeping of pets.

I also confirm that as of this date, my pet is current on all inoculations.

Pet Owner Signature Date

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By my signature below, I as the Unit Owner, acknowledge that I am aware of and agree to abide by the Pet Policy as set forth in the Parkfairfax Condominium Unit Owner's Association Policy Resolution Number Seven , relating to the keeping of pets. I further acknowledge my responsibility to make my tenants aware of Policy Resolution Number Seven.

Unit Owner Signature Date (See back page)