

ANIMAL HOME QUARANTINE

PRIVACY ACT STATEMENT

AUTHORITY: Title 10, United States Code, Sections 3013, 5013 and 8013.

PRINCIPAL PURPOSE(S): The purpose is to ensure thorough analysis, treatment, and epidemiologic study of all bite cases treated at this veterinary treatment facility.

ROUTINE USE(S): The information will be used to locate animals and animal owners during quarantine to assure protection of the bite victim.

DISCLOSURE: Voluntary; however, if the information is not provided, the animal cannot be authorized home quarantine.

1. AGREEMENT

I, _____ (*Printed name*), being the owner of a possible rabid animal, do agree to the following as a prerequisite for quarantining my animal at home:

- a. That I will keep this animal either indoors or in an excluded area at all times during the quarantine period.
- b. That I will not allow this animal to come in contact with other animals or anyone other than the members of my immediate family.
- c. That I will report any unusual change in behavior or any sudden symptoms to the Veterinary Treatment Facility.
- d. That in the event of the death of the animal, I will notify the Veterinary Treatment Facility at: (*Telephone number*) _____ at once. (On weekends and holidays, call _____, and ask for the Veterinarian-On-Call.)
- e. That I will bring said animal to the Veterinary Treatment Facility (Building Number _____) between _____ and _____ hours on (*Dates*) _____ and _____ for a checkup, final examination, and official release from quarantine.

2. OWNER

a. SIGNATURE		b. DATE SIGNED	
c. UNIT		d. ADDRESS (<i>Street, City, State, Zip Code</i>)	
e. TELEPHONE NUMBER (<i>Include Area Code</i>)			
f. VETERINARIAN			