



Parks, Recreation and Neighborhood Services

CITY OF SAN JOSÉ ANIMAL CARE CENTER



Trap Loan Agreement

Name _____

Address _____

Phone (home) _____ (work/other) _____

Location at which traps will be set (address or nearest intersection):

Loan Date _____ Due Back Date _____ Activity # _____

Number of traps borrowed _____ Trap ID number(s) _____

Deposit per trap \$ _____ X _____ traps = Total Deposit \$ _____

Deposit accepted by: _____

I agree to fully abide by the guidelines for humane trapping as described below:

- I am the owner/manager of the property at which the traps will be set or have obtained permission from the owner for trap setting.
- I agree to check traps at least 2 times per day.
- I agree to release trapped wildlife where they were trapped unless they are sick/injured in which case I will call to report.
- I agree to place a towel over the trap after the cat is caught to relieve his/her fear and anxiety.
- I agree to transport trapped cats to the veterinarian for spaying & neutering or to the shelter to drop off.
- I agree to bring borrowed traps back to the Animal Care Center no later than the Due Back Date designated above.
- I agree that if the trap is lost, stolen, or damaged, I forfeit the deposit.

Failure to return the trap by due date may result in forfeiture of deposit.

****The trap deposit is \$40.00 for Regular size cage and \$60.00 for a Large cage****

CASH DEPOSIT ONLY

Signature _____ Date _____

Date Trap Returned: _____ Deposit Amount Returned: \$ _____ Returned To: _____

Condition of Trap(s): _____ Processed By: _____

Original to file

Copy to Renter
Revised 9/21/06