

The Villages at Freedom Green
PET REGISTRATION

Date _____

Unit # _____

Resident Name _____ Phone # (home) _____

Phone # (work) _____

Type of Pet

Breed _____ Color _____

Size _____ lbs. Name of Pet _____

Age: _____ Spayed/Neutered Yes ___ No ___ **Include Copy of Certificate**

Mansfield Dog License # _____

Cat Spayed /Neutered Certificate or Vet Contact Information _____ Phone _____

Type of Pet

Breed _____ Color _____

Size _____ lbs. Name of Pet _____

Age: _____ Spayed/Nurtured Yes ___ No ___ **Include Copy of Certificate**

Mansfield Dog License # _____

Cat Spayed /Neutered Certificate or Vet Contact Information _____ Phone _____

Forward all Pet Registration Materials to:

The Villages At Freedom Green Association, Inc.
50 Founders Plaza, Suite 207
East Hartford, CT 06108
or by Fax: 860-528-2989

I acknowledge the information above is complete. By signing this document, I am acknowledging all rules and regulations put forth by the Town of Mansfield, CT and The Villages at Freedom Green.

I acknowledge I am limited to (1) dog and (1) cat unless I purchased my unit prior to July 2005.

If my pet status should change during the calendar year I will notify the management company by supplying a new form.

Signature

Date

Homeowner's Acknowledgement for HOUSEHOLDS WITHOUT PETS.

I do not have any pets [cats and/or dogs] in my unit. I understand that if I do acquire a pet during the period of time between the next required registrations, that I will forward the pet information to the Property Management Company. Failure to do so can result in a fine.

Signature

Date