



**City of Dallas**  
**APPLICATION FOR APPROVAL AS**  
**A FOSTER CARE PROVIDER OF DOGS/CATS**



This Application as an approved foster care provider is submitted pursuant to Section 7-4.6 of the Dallas City Code.

APPLICANT'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
 Number Street Apt./Suite No.  
 Dallas TX  
 City State Zip Code

MAIN TELEPHONE NUMBER: \_\_\_\_\_

SECOND TELEPHONE NUMBER: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

CURRENT NUMBER OF FOSTER CARE ANIMALS: \_\_\_\_\_  
 MAXIMUM NUMBER OF CATS TO BE FOSTERED AT ANYTIME: \_\_\_\_\_  
 MAXIMUM NUMBER OF DOGS TO BE FOSTERED AT ANYTIME: \_\_\_\_\_  
 NUMBER OF CATS PERMANENTLY HARBORED ON THE PREMISES: \_\_\_\_\_  
 NUMBER OF DOGS PERMANENTLY HARBORED ON THE PREMISES: \_\_\_\_\_  
 APPROXIMATE LOT SIZE OF THE PREMISES: \_\_\_\_\_  
 APPROXIMATE SQUARE FOOTAGE OF DWELLING UNIT: \_\_\_\_\_  
 ANIMAL WELFARE ORGANIZATION WITH WHICH YOU ARE AFFILIATED: \_\_\_\_\_

CONTACT PERSON WITH THAT ORGANIZATION: \_\_\_\_\_  
 CONTACT PHONE NO.: \_\_\_\_\_ CONTACT EMAIL: \_\_\_\_\_

**I understand that providing false or misleading information on this Application may result in the denial or revocation of my approval as a foster care provider status under Section 7-4.6 of the Dallas City Code. I hereby certify and affirm that all information furnished is true and correct to the best of my knowledge.**

\_\_\_\_\_  
 Signature of Applicant Date

**THE APPLICATION HAS BEEN APPROVED TO FOSTER THE FOLLOWING NUMBER OF FOSTER ANIMALS AT THE ADDRESS LISTED ABOVE:**  
**MAXIMUM NUMBER OF CATS FOSTERED AT ANY TIME: \_\_\_\_\_**  
**MAXIMUM NUMBER OF DOGS FOSTERED AT ANY TIME: \_\_\_\_\_**  
 Issued this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
 \_\_\_\_\_  
 Director or Authorized Agent

