

FIRST RESPONDERS, WE HAVE EVACUATED...

WITH our pets!

- face out when evacuated -

WITHOUT our pets!

- additional information inside -

Date

Time

Distributed courtesy of:



Somerset County CART
908-725-5070
animalresponseteam@co.somerset.nj.us

For additional information or to re-print this form,
visit www.co.somerset.nj.us/cart

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PET RESCUE



NUMBER OF PETS IN THE HOME:

DOGS:

CATS:

BIRDS:

OTHER:

IN CASE OF EMERGENCY

CALL #:



PLEASE TAPE ON OR NEAR ENTRY DOOR

PET RESCUE



NUMBER OF PETS IN THE HOME:

DOGS:

CATS:

BIRDS:

OTHER:

IN CASE OF EMERGENCY

CALL #:



PLEASE TAPE ON OR NEAR ENTRY DOOR

Attention First Responders

Please take this form with you, so you have information about my pet(s).

If I am unable to provide care for them for any reason, please notify:

Contact: _____ Phone: _____

Address: _____

Pet Owner: _____ Cell Phone: _____

About My Pet(s): Dog Cat Other: _____

Breed/Coloring: _____ Name: _____ Age: _____

Special Needs: _____

#2 Dog Cat Other: _____

Breed/Coloring: _____ Name: _____ Age: _____

Special Needs: _____

#3 Dog Cat Other: _____

Breed/Coloring: _____ Name: _____ Age: _____

Special Needs: _____

#4 Dog Cat Other: _____

Breed/Coloring: _____ Name: _____ Age: _____

Special Needs: _____

Vet: _____ Phone: _____

By signing this form, I fully understand and accept that I will be responsible for any medical, boarding, care, etc. expenses provided to my animal(s), until such time as I or the designated person named.

Signature: _____ Date: _____

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