



**COUNTY OF LOS ANGELES DEPARTMENT OF PUBLIC HEALTH
VETERINARY PUBLIC HEALTH PROGRAM
Tel. (213) 288-7060 Email: vet@ph.lacounty.gov**



TRANSFER OF QUARANTINE PERMIT APPLICATION

SHELTER TO MEDICAL FOSTER FOR PET EXPOSURE 180 DAY QUARANTINE

Shelter requesting transfer of dog or cat in 180 day quarantine after potentially being exposed to rabies (e.g. wildlife contact) and has completed the required rabies vaccination schedule:

Animal Shelter Information

Shelter Name: _____
Address: _____
Phone number: _____
Shelter Manager: _____

Animal To Be Transferred To Medical Foster Location For Remainder Of Quarantine

Shelter Impound #: _____
VPH Case #: _____
Animal Description (species/breed/sex/color markings): _____
Dog License # and City: _____
Rabies Vaccination Date(s): _____
Date of Proposed Transfer: _____

Medical Foster Location

Name of Medical Foster Individual: _____
Phone Number: _____
Email: _____
Name of Foster Facility (if applicable): _____
Address Where Animal will be Housed During Entire Remainder of Quarantine: _____

I _____, the medical foster for which the above stated animal will
(Medical Foster Name)

continue the established quarantine, understand and agree to the following:

- a) Prior to the transfer of said animal, this facility/home in which the animal will continue the established quarantine will be inspected by Veterinary Public Health staff to ensure that the facility is suitable to medically foster and maintain the established quarantine on said animal.
- b) During the established quarantine and at the end of the quarantine, the facility/home is subject to and will make itself available for multiple announced and unannounced inspections by Veterinary Public Health and the Animal Shelter.
- c) The Animal Shelter is responsible for the proper transportation of the said animal to the new medical foster quarantine location. The medical foster individual is not permitted to transport the animal to and from the Animal Shelter.
- d) Animals transferred to medical foster care facilities remain under the shelters authority during the quarantine period (e.g. transfer of ownership is not allowed).
- e) The designated medical foster individual shall abide by all state and local laws with respect to quarantined animals for rabies observation. This includes:
 - a. Quarantined animals must be confined to the premises indicated above at all times unless the animal must go to a veterinarian for medical care.
 - b. Shall have no contact with any other animal or the public during the quarantine period.
- f) The designated medical foster individual will immediately contact by phone (213-989-7060) and email if after hours (vet@ph.lacounty.gov) Veterinary Public Health if the health status of the said animal changes anytime during the quarantine period.
- g) At any time if the designated medical foster individual cannot maintain the quarantine on the said animal, that individual will immediately contact Veterinary Public Health and the original Animal Shelter. The Animal Shelter is responsible for transporting the animal back to the original Animal Shelter to complete the established quarantine.
- h) This agreement may not be amended or modified without written approval of Veterinary Public Health management. If any of the above regulations are not followed, the medical foster individual and facility will no longer be approved for medical foster quarantine transfers in the future. In addition, legal action may be taken, depending on the circumstances.

I, _____, shelter manager of _____
(Shelter Manager) (Shelter Name)

Understand and agree to the following:

- a) Animals quarantined for 6 months must receive 3 rabies booster vaccines prior to the transfer. Rabies booster should be given at day 0, 3 weeks, and 8 weeks from the day of contact with wildlife. Quarantined animals must be quarantined in the Animal Shelter for a minimum of 10 weeks (2 weeks post the 3rd vaccine) to be considered for the option of being transferred to a different facility.
- b) Animals transferred to medical foster care facilities remain under the shelters authority during the quarantine period (e.g. transfer of ownership is not allowed).
- c) The Animal Shelter is responsible for the proper transportation of the said animal to the new quarantine facility.

- d) The Animal Shelter will abide by all state and local laws with respect to quarantined animals for rabies observation.
- e) This agreement may not be amended or modified without written approval of Veterinary Public Health management.
- f) If the new quarantine facility cannot maintain the quarantine or does not abide by the laws and regulations for rabies quarantine animals, this Animal Shelter will be required to return the animal for the remainder of the quarantine period. Depending on the circumstances, further such transfers may no longer be approved for animals at the shelter.

I, _____, veterinarian of _____
 (Shelter Veterinarian) (Shelter Name)

Understand and agree to the following:

- a) The quarantined animal has received 3 rabies booster vaccines given at day 0, 3 weeks, and 8 weeks from the day of contact with wildlife.
- b) The quarantined animal has been at the shelter for at least 2 weeks post administration of the 3rd rabies vaccine facility (must be at Animal Shelter for a minimum of 10 weeks).
- c) The quarantined animal has been physically examined and is cleared to continue the 6-month quarantine at a medical foster.

 Medical Foster Individual (Print Name) Medical Foster Individual (Signature) Date: _____

 Animal Shelter Manager (Print Name) Animal Shelter Manager (Signature) Date: _____

 Shelter Veterinarian (Print Name) Shelter Veterinarian (Signature) Date: _____

For Local Health Department Use Only

Location inspection completed by VPH

Approved

Not approved

If not approved, provide reason:

Veterinary Public Health Program Director Signature: _____ Date: _____