



East Bay Animal Hospital HURRICANE & SAFETY PLAN 2021

In an effort to advise you, our client, of the EBAH Safety Plan which will be implemented in the event of a disaster, the following written notice has been developed.

IN PREPARATION FOR AN IMPENDING DISASTER, ALL PETS ADMITTED INTO EBAH DURING HURRICANE SEASON, JUNE 1 THROUGH NOVEMBER 30, MUST HAVE THIS FORM COMPLETED, SIGNED AND ON FILE.

Please initial each statement to acknowledge you have read, understand and agree to all the information.

- ____ 1. If you are going to evacuate, plan to take your pet with you. Make advanced arrangements to stay with family, friends, or in a host home located in a non-evacuation zone. We can provide a list of "Pet Friendly" hotels and "Pet Friendly" evacuation shelters for you to use as a reference.
- ____ 2. **EBAH is not an evacuation shelter.** In the event an approaching storm strengthens to hurricane status, evacuation procedures may take place as outlined below. No animals will be admitted for boarding following the issuance of a hurricane watch.
- ____ 3. Pets boarding at EBAH during a hurricane watch, require a permanent form of identification (microchip). If your pet does not already have a microchip, **one will be implanted at your expense.**
- ____ 4. If your pet is boarding with us at EBAH, we require an **emergency contact person** who has agreed and **will pick-up your pet** in the case of an evacuation.
- ____ 5. If your pet is boarding and arrangements are unable to be made to have your pet picked up, and staff evacuation becomes necessary, we may leave your pet in East Bay Animal Hospital unattended for an unknown period of time. Your pet will be provided as secure accommodations as possible and with several days supply of food and water. **As a last resort**, and if it is possible, your pet may be evacuated to a shelter or to a location in a designated non-evacuation zone.
- ____ 6. Using the emergency number indicated on your boarding form, and **provided communication systems are functioning**, you will be advised as to the welfare of your pet.
- ____ 7. **We make no implied or expressed guarantee our facility or designated evacuation site could withstand a disaster.** Every effort shall be made to protect your pet as well as the employees of **East Bay Animal Hospital.**
- ____ 8. It is in your pet's best interest to remain calm during the storm. Mild sedation may be required for some pets; sedation will be administered at the discretion of the veterinarian and **at owner cost.**
- ____ 9. If our hospital or designated evacuation site is damaged, and your pet is injured, we will make every effort to provide first aid as soon as possible. **Associated fees will be at the owner's expense.**
- ____ 10. **If your pet is severely injured**, and we are unable to provide advanced medical care for whatever reason, at their discretion, our veterinarians will humanely euthanize your pet. Caring for your pet is our utmost concern, however **we do not want any pet to suffer.**
- ____ 11. **Regular boarding fees will be charged, and there will be an evacuation fee of \$200.00 per pet, in the event your pet is not picked up and relocation becomes necessary.**
- ____ 12. In accordance with the Humane Society of the United States recommendations, we have prepared a disaster supplies kit to assist us in our efforts to provide care for your pet.

ACKNOWLEDGEMENT/SIGNATURE:

Owner/Agent: _____ **Pet(s)** _____

Emergency Contact (Name and phone number): _____

I am the **owner, or agent** for the owner, of the above-named animal(s) and have the authority to execute this acknowledgement. I hereby authorize East Bay Animal Hospital to transport, medicate, anesthetize, treat and perform any procedure(s), as are in the opinion of the veterinarian, necessary and advisable for my pet's health and/or comfort in the event of an emergency. I accept all procedures to be done to the best of the abilities of the professional staff, and I realize no guarantee or warranty can ethically or professionally be made regarding the results or outcome. **I assume all financial responsibility, and understand payment is due upon completion of service.**

Signature of Owner/Agent: _____ Date: _____