

**VETERINARIAN'S STATEMENT
ANIMAL EVALUATION FORM**

Animal found on the premises of _____

Location or complete address _____

ID# assigned to animal _____ Species _____ Breed _____ Sex _____ Weight _____

Approx. age _____ Description (color/markings) _____

I, _____, am a veterinarian licensed in the State of _____

I am responding to a request by agency I _____ to evaluate the above identified animal.

Please verify that this animal exhibits the following:

- | | | |
|--|--|--|
| <input type="checkbox"/> present (normal/rapid) | <input type="checkbox"/> eye normal (normal) | |
| <input type="checkbox"/> program <input type="checkbox"/> marking <input type="checkbox"/> in heat | | |
| <input type="checkbox"/> evidence of previous traumatic/plastic application | | |
| <input type="checkbox"/> abrasions | <input type="checkbox"/> multiple bite wounds | <input type="checkbox"/> arthritis, other lameness |
| <input type="checkbox"/> delirious | <input type="checkbox"/> tumors, other growths | <input type="checkbox"/> congenital malformations |
| <input type="checkbox"/> excessive hair loss | <input type="checkbox"/> abscesses | <input type="checkbox"/> various infections |
| <input type="checkbox"/> excess itching | <input type="checkbox"/> diarrhea | <input type="checkbox"/> eye infections |
| <input type="checkbox"/> mange | <input type="checkbox"/> urine voiding | <input type="checkbox"/> generalized debility |
| <input type="checkbox"/> dermatitis | <input type="checkbox"/> dental problems | <input type="checkbox"/> internal parasites |
| <input type="checkbox"/> flea dirt | <input type="checkbox"/> respiratory infection | <input type="checkbox"/> (check one eye below) |
| <input type="checkbox"/> ticks | <input type="checkbox"/> locomotor symptoms | |

Other (e.g., other afflictions, comments on weight, observations of behavior, etc.) _____

Check here if animal was euthanized I hereby certify that this animal is so injured, diseased, disabled, or infirm as to require euthanasia to be spared suffering. Euthanasia is appropriate for this animal, whose symptoms are as described above.

In a written instrument, any person who knowingly makes a false statement therein which each person does not believe to be true has committed a crime under the laws of the State of New York punishable as a Class A Misdemeanor. (PL § 120.05)

Signature of Veterinarian _____ Date _____

Animal kept on premises

Released to _____ Date _____