

# The Berkeley

Berkeley Apartments  
35-25 77<sup>th</sup> Street

Berkeley Hall  
77-12 35<sup>th</sup> Avenue  
Jackson Heights, New York 11372

Berkeley Gardens  
35-24 78<sup>th</sup> Street

## PET DOCUMENTATION FORM

(Picture of Pet is required – Replace picture below with your pet’s picture. A form needs to be completed for each pet separately.)

**Please note: A pet may not exceed 30 pounds in weight at maturity**



Name of Owner: \_\_\_\_\_

Date: \_\_\_\_\_

35<sup>th</sup> Avenue

77<sup>th</sup> Street

78<sup>th</sup> Street

Apt. # \_\_\_\_\_

Name of Pet: \_\_\_\_\_

Category: \_\_\_\_\_

License #: \_\_\_\_\_ Breed: \_\_\_\_\_

Age: \_\_\_\_\_

Height/Length/Weight: \_\_\_\_\_ Name of Veterinarian: \_\_\_\_\_

Temperament: \_\_\_\_\_

(Ex. shy, calm, energetic, outgoing, aggressive)

Date of last set of shots: \_\_\_\_\_ Attach proof of shots

Provide any additional information regarding training your pet has received:

---

### Additional information required for Therapy/Emotional Support/Service Pets

Certified as service pet: \_\_\_\_\_ Certification Organization: \_\_\_\_\_

Attach copies of documentation

---

### ACKNOWLEDGEMENT:

All dogs **MUST** attend the potential buyers Admissions Committee interview. In the event there is an episode where the pet lunges, bears its teeth, hisses or otherwise acts aggressively, the owner shall enroll the pet, within 30 days of notification to the owner of the episode, in an accredited training program, and present the Board, upon completion, with a certification of successful completion of the program. If my pet continues with the issue, I understand that my pet will no longer be able to reside on the Berkeley premises.

\_\_\_\_\_

Name of Shareholder

\_\_\_\_\_

Name of Shareholder