

EQUINE MONITORING RECOMMENDATIONS AND AGREEMENT



Alaqua Animal Refuge recommends the following to be done to ensure the health and safety of the above equine(s)

Owner/Caretaker:

Location of Equines:

Description of equines:

Equine(s) must be seen by a Vet by the following date:

Changes in diet (please keep receipts):

Facility improvements:

Direct care improvements:

Additional areas of concern:

Follow up visit date:

You are hereby notified that the above horse(s) cannot be relocated without first informing the investigator of the new location per Florida Statute 918.13

I have read and understand the above recommendations given to me

Signature of Caregiver/Owner:

Date:

Signature of Investigator:

Date: