

# **MONROE COUNTY EMERGENCY MANAGEMENT**



## **PET FRIENDLY SHELTER OPERATIONS PLAN**

## **I. INTRODUCTION**

### **Purpose**

The purpose of this plan is to provide standard operating procedures for operation of the following Primary Shelters as a pet friendly evacuation shelters.

- Key West High School – *#4-124 & 4-125 (Girls & Boys Locker Rooms)*
- Sugarloaf School – *#3-123 & 1-123 (Boys Locker Room)*
- Stanley Switlik School – *Pets will be shelter at Marathon High School #611 (The Marathon High School, Boys Room)*
- Coral Shores High School - *# 2-004A, 2-110A, 2-1108 (Boys Locker Room)*

### **Scope**

Overall management, coordination, prioritization and identification of services and assets needed to support humans and domestic animals being housed together in a shelter during an emergency or disaster.

## **II. POLICIES**

### **Authorities**

In performing the functions outlined in this SOP County and Municipal agencies are governed by the authorities of Public Law 93- 288, as amended, FS§ 252, FS § 768.13 and other rules and regulations governing this agency.

### **Assignment of Responsibilities:**

#### **Primary Agency**

MCEM is designated as the lead agency and is responsible for duties under the ESF-17, as well as the following:

1. Notify, activate and mobilize agencies assigned to the KWHS, SLS, SSS, CSHS, KLS, and FIU pet shelter
2. Initial notification to the primary agency of this PFSP and the ESF to implement all or portions of it.
3. Coordinate all support agency actions in supporting the pet shelter.
4. Coordinate requests for support from this PFSP and the ESF between other ESFs represented in the EOC.
5. Continual improvement and refinement of this Plan and ESF.
6. Coordinate request for assistance and additional resources with the appropriate agencies.
7. Function as the County's representative and liaison with the Emergency Operations Center (EOC) for activities and responsibilities carried out by other support agencies.

8. Provide SM and coordinate volunteer staffing for the KWHS, SLS, SSS, CSHS, and FIU pet shelter.
9. Provide emergency supplies for animal care.
10. Coordinate the intake and placement of Human/animal occupants of the KWHS, SLS, SSS, CSHS, and FIU pet shelter

### **Support Agencies**

Support agencies are responsible for the following:

1. Notify, activate and mobilize personnel and equipment when required
2. Designate and assign people for staffing all facilities as required. Provide representation when requested by the primary agency of this PFSP
3. Coordinate all actions of the support agency with the primary agency when performing the assigned mission of this PFSP
4. Identify all personnel and resource requirements to perform assigned missions in excess of the support agencies' capabilities

### **Additional Support Agencies**

Additional support agencies, as listed at the ESF-17 Station at EOC, shall provide support and assistance as requested.

### **Response Requirements**

Federal and State assistance to this plan is provided under Public Law 93-288 and F.S. § Chapter 252. The primary and support agencies of this plan must anticipate being as self-sufficient as possible during the first 72 hours following an event.

### **Resource Coordination**

This PFSP will provide human/animal assistance through its primary and support agencies in coordination with other ESFs to support its missions. This PFSP will allocate available resources to each mission based upon priorities identified by the EOC. Relative to human/animal shelter matters. If animal assistance resources are locally unavailable, the ESF will directly request assistance from its corresponding ESF at the State EOC.

All other ESF's will coordinate with the ESF 17 representatives at EOC when requesting emergency support or disaster assistance. If a conflict of priorities develops, this ESF will work directly with the Operations Supervisor to resolve the conflict.

## **Recovery Operations**

Although this annex addresses recovery activities of the agencies associated with this ESF, EOC is responsible for coordinating all recovery activities to provide animal services to the County, as required. Therefore, recovery operations of this ESF will be initiated commensurate with emergency priorities within the County and based on the availability of resources.

## **Operating Facilities**

### **Pet Friendly Shelter Teams:**

- **Vendors:**

Vendors providing animal services to Monroe County will provide staffing assistance. They will also provide ESF17 staffing support when requested by the County EOC staff.

- **Volunteers:**

The PFST will be made up of one AEO and two volunteers identified prior to event. The rest of the shelter support team will be made up of volunteers from the individuals sheltering within the facility. The Team will be stationed at the assigned Primary Staging Area. Duties of the team include:

Have potential volunteers fill out the identification and information form, if they meet the following criteria:

1. Is a Monroe County resident.
2. Is 18 years old or older and in good physical condition.
3. Picture identification.
4. Ability to write legibly.
5. Ability / knowledge to open designated pet shelter facility upon demand.
6. Maintain list of volunteer names, hours worked, and forward, upon demand, that information to the Shelter Manager.

### **Shelter operations including:**

1. Logging in animals and owners.
2. Checking the registration log for completed forms.
3. Sorting animals to group kinds/types.
4. Reviewing shelter rules and regulations with evacuees.
5. Verifying vaccination records.
6. Inspection of animal restraint equipment (cages, pens, collars, leashes)
7. Providing support agencies with number of registered animals.
8. Identify all animal medications brought into the shelter and insure they are in a controlled location.
9. Issue identification tags and wrist bands for people/carriers/cages and animals.
10. Issue cleaning supplies to evacuees as needed and available.
11. Placing protective barrier between cages and the floor of the shelter.

**During the month of April the shelter support team shall:**

1. Check supplies in the Shelter Hurricane Kit
  1. Order any supplies needed.
  2. Prepare intake logs and forms.
  3. Walk through all the Shelters, photograph, and note conditions and or damages.

**III. EMERGENCY MANAGEMENT CENTER LEVELS OF ACTIVATION**

In the event of an emergency this PFSP will follow the MCEM Levels of Activation (1-3). The Monroe County Shelter Manager will assess the severity and the extent of the area impacted by the event and designate appropriate pre-identified pet sheltering facilities. In the event of a large scale disaster there may be multiple shelters assigned.

**Pet-Friendly Shelter Preparations:**

**Level 3 – Monitoring**

1. Review emergency procedures.
2. Review and update organizational plans.
3. Notify PFST and direct them to prepare vehicles and equipment.
4. Contact support agencies.
5. Identify designated pet friendly shelter facilities.
6. Notify Pet Friendly Shelter Managers and assign duties accordingly.

**Level 2 - Partial Activation**

Danger is probable within 24 to 36 hours. Staff is briefed and Municipal and County coordination is established. Emergency Information Hotline is activated.

1. All PFST members are put on stand-by.
2. PFST briefed by the Monroe County Shelter Manager with regards to the designated pet friendly shelter facilities, and when and where to report.
3. Supply shelters with needed provisions (i.e. dog food, cat food, water, etc.), and provide access to such supplies to PFST.
4. Notify volunteers to remain on stand-by.

**Level 1 – Full Activation**

Danger is probable within 12 to 24 hours.

1. Shelter will be opened to evacuees and in-processing will begin.
2. Initiate registration of animals.
3. Review rules and regulations with pet owners.
4. Verify vaccination records of incoming animals.
5. Inspection of animal restraint equipment (cages, collars, leashes, etc.)
6. Provide Shelter Manager with number of animal owners and pets.
7. Issue identification tags.

## **Post Event**

Damage assessment is conducted, noted appropriately, and conveyed to Shelter Manager.

The PFST will begin to deactivate the shelter by:

1. Verifying the all clear has been given by EOC.
2. Checking registration log as people leave.
3. Prepare area for Public Works to clean and disinfect animal areas of the shelter.
4. Returning moved items to proper place (once area cleansed).

## **IV DISASTER SUPPLIES/ EQUIPMENT IN-COUNTY PET-FRIENDLY SHELTERS**

Laptop computer/printer

First aid kits

Fire extinguishers

Pet carriers

Portable radios

Clipboards

Blankets

Catch-poles and nets

Newspapers

Standard tool kit for minor repairs

Bolt cutters

Nylon rope

Flashlight with battery supply

Plastic carcass bags

Supply of animal information forms

Ball point pens and felt markers

ID bands, tags, or collars

Air filtration masks/bandanas

Pooper Scoopers

Leashes

Cleaning supplies, bleach, sanifect, buckets, rubber gloves, garbage can liners, brooms, hoses, paper towels, antibacterial soap

Food, dry dog, dry cat, canned dog, canned cat

Bottled water.

Nylon leashes

Animal stretcher

Rubber boots

Leather gloves

Waterless hand cleaner, disposable towelettes, and paper towels

Absorbent materials (such as cat litter)

Radios with extra batteries

Manual can openers

Duct tape

Camera, film, and batteries

Disposal litter pans

Waste disposal containers, 2 each (20 gal)

800 MHz radio w/charger

Chairs/ cots

Office supplies.

Log forms, intake cards, ID tags

**Personal supplies** (brought by individual)

- \_\_\_chair/cot
- \_\_\_sleeping bag
- \_\_\_change of clothes
- \_\_\_rain gear
- \_\_\_medications
- \_\_\_Water, light food stuffs
- \_\_\_special dietary needs

**V. LIST OF AGENCIES**

**A. Primary Agencies** (To be contacted only by MCEM):

- 1. Monroe County Emergency Management Department (305)289-6018
- 2. Monroe County Fire Rescue (305)289-6088
- 3. Monroe County Public Works (305)289-4560
- 4. Monroe County School District (305)293-1400

**B. Secondary Agencies:**

- 1. Florida Keys SPCA (305)294-4857
- 2. Marathon (Florida Keys SPCA) (305)743-4800
- 3. Monroe County Sheriff's Office (305)296-2424
- 4. Florida Fish and Wildlife Commission (305)289-2320
- 5. University of Florida Extension Services (305)292-4501
- 6. City of Key West Police Department (305)809-1011
- 7. Key Colony Beach Police Department (305)743-5380
- 8. Florida Highway Patrol (305)289-2383

# **APPENDIX OF FORMS**

# **PET OWNER SHELTER AGREEMENT**

## AGREEMENT

I, \_\_\_\_\_ (the owner of the pet(s) listed on the registration form) understand that an emergency exists and that special arrangements have been made to allow my family and pet(s) to remain together in this shelter facility. I understand and agree to abide by the pet care rules contained in this agreement and have explained them to any other family member accompanying my pet(s) and me.

### RULES:

1. My pet(s) will remain contained in its approved carrier except at scheduled times. During scheduled relief times, my pet(s) will be properly confined with leash, harness or muzzle (if necessary). Scheduled times will be strictly adhered to.
2. I agree to supply food and bowls for food and water.
3. I certify that my pet(s) is current on rabies and all other vaccinations recommended
4. I will maintain proper identification on my pet(s) and its carrier at all times.
5. I will permit qualified animal shelter personnel/vet to administer medical care should it become necessary.
6. I acknowledge that my failure to follow these rules may result in the removal of my pet(s) to another location. I further understand that if my pet(s) becomes unruly, aggressive, shows signs of contagious disease, is infested by parasites (fleas, ticks, lice, etc.) or begins showing signs of stress related conditions, it may be removed to a more appropriate location. I understand that any decision concerning the care and welfare of my pet(s) and the shelter population as a whole are within the sole discretion of the shelter manager, whose decision is final.
7. I further understand that any damage caused by my pet(s) will be my responsibility.

I certify that my pet(s) has no previous history of aggressive behavior and has not been diagnosed with any contagious disease for which it has not received successful treatment.

I hereby agree and hold harmless all persons, organizations, corporations, or government agencies involved in the care and sheltering of my animal(s). I further agree to indemnify any persons or entities which may have suffered any loss or damage as a result of the care and sheltering of my animal(s).

SIGNED \_\_\_\_\_

PRINTED NAME \_\_\_\_\_ DATE \_\_\_\_\_



## **Pet-Friendly Hurricane Evacuation Center (PHEC) Registration Guidelines Pre-Registration**

### **Phase 1**

All residents living in the qualified areas must pre-register their families and their center acceptable pets (a maximum of three). An adult who will be sheltering at the Pet-Friendly Hurricane Evacuation Center (PHEC) with his or her pet(s) can call the Monroe County Emergency Management at **(305) 299-6018** to receive an application packet by mail, or the applicant can complete the online packet and mail it to the address provided. Required information will include:

- Name of each family member sheltering at the Center.
- Home address.
- Daytime phone number.
- Evening phone number.
- Cellular phone number.
- Name of pet(s).
- Description of pet(s) including gender/breed/coloring and weight.
- Medical history of pet including all current medication.
- Description of carrier/cage.

### **Phase 2**

Monroe County Emergency Management will mail a registration packet which includes:

- A tentative acceptance letter.
- Part 2 of the application which must be:
  - completed in its entirety.
  - notarized.

### **Phase 3**

Applicants must return the following items to be eligible for acceptance into the PHEC:

- Part 2 of the application, completed and notarized.
- A photocopy of the most recent utility bill that reflects the home address provided on the application.
- A picture of each pet being registered (minimum size of 3"x 5").
- A photocopy of a picture identification of the adult registering/sheltering at the PHEC.

Acceptable forms of identification are:

- State of Florida Driver's License
- Current United States Passport
- State of Florida Identification



## Pet-Friendly Hurricane Evacuation Center (PHEC)

### Application: Part 1

Complete Name of

Adult Applicant: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

### **Family Members (first and last name, if different from above):**

1 \_\_\_\_\_ age: \_\_\_\_\_

2 \_\_\_\_\_ age: \_\_\_\_\_

3 \_\_\_\_\_ age: \_\_\_\_\_

4 \_\_\_\_\_ age: \_\_\_\_\_

### **Pets:**

Name	Age	M/F	Spayed Neutered	Breed	Color/Markings
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

### **Pet Medications or Dietary Supplements:**

Condition	Medication/Dietary Supplement	How is it administered?
_____	_____	_____
_____	_____	_____
_____	_____	_____

The information above will be provided to the animal handler for scheduling medication administration.

### **Crate/Cage info:**

Animal type	Material	Dimensions	Access Panel Location
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



## **Pet-Friendly Hurricane Evacuation Center (PHEC) Application: Part 2**

### **Instructions**

I agree to read all information and follow all instructions as detailed on this registration form. I understand that failure to do so will preclude my and/or my family's, and my pet's(s') acceptance. At the end of each paragraph or section there is a box that must be checked acknowledging that you read, understood, and agree to abide by the provisions therein. This form must be completed in its entirety, notarized, and returned by mail to:

**Pet-Friendly Shelter Application  
c/o Monroe County Emergency Management  
490 63<sup>rd</sup> Street  
Marathon, Florida 33050**

This form must be signed and dated by an adult who is reporting to the PHEC for sheltering. It is the responsibility of the registrant to assure receipt of this form by the Monroe County Emergency Management. This may be done by calling **(305)289-6018**.

I have read and accept the above.

The information that I provided during my registration is accurate and complete. I understand that only those family members and pets pre-registered are allowed into the PHEC.

I have read and accept the above.

I agree to notify Monroe County Emergency Management as soon as possible of any changes in my registrant status. I understand that any changes, additions or deletions, either of persons or animals, must be made prior to a hurricane warning being issued for any one storm.

I have read and accept the above.

I understand that to gain entrance into the shelter I must reside in one of the mandatory evacuation zones. If my residence changes to an area outside a mandatory evacuation zone, or if I am no longer residing in a home that has been deemed unsafe by Monroe County, I understand that I (and my family and pet(s)) will no longer be eligible for sheltering at the PHEC.

I have read and accept the above.

I understand that to gain entrance into the PHEC. I must arrive at the PHEC with all items outlined in the tentative acceptance letter that accompanied this form.

I have read and accept the above.



## Application: Part 2 (continued)

My animal(s) are in good health. I understand that even though pre-registered, if my pet(s) is deemed a health or safety risk to any person or animal, entrance will be denied. This includes flea or tick infestation or any active parasitic or fungal infection such as ringworm or mange. I agree to my pet being examined by qualified animal shelter personnel to determine its fitness for entry. I understand and agree that at all times, regardless of compliance with all requirements, Monroe County still retains sole discretion in accepting persons and pets to the PHEC.

I have read and accept the above.

My pet(s) will be current on all required vaccinations as noted on the acceptance letter. I will provide proof of all required vaccinations at check-in as well as current rabies tag(s) as required. I understand that failure to provide these items will preclude entrance into the shelter.

I have read and accept the above.

I understand and agree that at least one (1) adult family member will reside in the shelter with the pet(s) at all times and that if at any time my pet(s) is(are) left in the shelter without at least one (1) adult family member that the animal(s) is then considered abandoned and will be immediately surrendered to \_\_\_\_\_.

I have read and accept the above.

I understand and agree that if for any reason my animal is left behind, it is thereby considered abandoned and I will be responsible for any and all fees, fines, or monetary remittance payable to \_\_\_\_\_ under their adoption, reunification, or euthanasia policy.

I have read and accept the above.

I understand and agree that upon entrance to the PHEC access to the animal(s) is limited and will be allowed contingent upon the needs of the animals, \_\_\_\_\_ staff, or PHEC staff.

I have read and accept the above.

I understand that the feeding, replenishing of water, and removal of waste materials from the cage is the responsibility of the adult family member. Immediately upon request of PHEC staff to report to the animal area, I will do so and perform any feeding, watering, or waste removal necessary.

I have read and accept the above.



I understand and agree that this PHEC registration program is not a sheltering contract and that there is no contractual, legal or equitable right to sheltering at the PHEC arising from completion and submission of registration documents or otherwise. I hereby agree to hold harmless all persons, organizations, corporations, or government agencies involved in the care and sheltering of my family, my pet(s) and myself at the PHEC and agree to waive any claim against such persons, organizations, corporations or government agencies involved in the care and sheltering of my family, my pet(s) and myself at the PHEC. I further agree to indemnify any persons or entities, organizations, corporations or government agencies which have suffered any loss, damage, or claim related in any way to the care and sheltering of my animal(s) at the PHEC. I also agree to undertake the defense of any claim against the County or other governmental agencies, organizations, or individuals arising out of the sheltering of a pet at the PHEC.

I have read and accept the above.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Notary Public

Stamp seal here

\_\_\_\_\_  
Date



## **Pet-Friendly Hurricane Evacuation Center (PHEC)**

### **Tentative Acceptance Letter**

Dear Applicant:

This letter serves to acknowledge receipt of Part 1 of your application for the Monroe County Pet-Friendly Hurricane Evacuation Center (PHEC). For the registration process to be complete, you must fill out and return Part 2 of the application and return it to:

**Pet-Friendly Shelter Application  
c/o Monroe County Emergency Management  
490 63<sup>rd</sup> Street, Suite 150  
Marathon, FL 33050**

Failure to return the form negates your application and hurricane evacuation center eligibility. It is your responsibility to contact the Monroe County Emergency Management at **(305)289-6018** to assure that the form was received and that your registration is complete.

This PHEC is the first of its kind in Monroe County and we are working to assure a successful operation. However, the success of this pet-friendly hurricane evacuation center depends upon you. On Part 2 of the application you acknowledged and agreed to certain provisions regarding shelter management. You are expected to abide by these provisions. Any infraction can result in your removal from the registration database and denial of use of the PHEC for current and future storms. You should understand that this letter, your application, or your compliance with all PHEC requirements do not constitute a binding commitment or contract that you and your pets will be accepted at the PHEC. The purpose of this application process is to facilitate the accommodation of applicants. However, everyone should understand that even if they comply with all application requirements and receive this letter, there is no guarantee or contractual commitment that you and your pets will be accepted at the PHEC.

If you live in one of the County's hurricane evacuation zones, mobile homes, or in a structure that has been deemed unsafe by the County, you must monitor the hurricane event and listen for the mandatory evacuation order. Upon issuance of a mandatory evacuation order for your area, you should report to the PHEC with all of the items listed in this letter. It is important to note that opening of this shelter is at the sole discretion of Monroe County and that you need to have a contingency plan for yourself and your pet(s) if this shelter is not opened for any reason, or if you and your pet are not accepted in the PHEC.

Upon arrival at the PHEC, all animals will be examined by a qualified shelter personnel / licensed veterinarian. The veterinarian will only examine the animal and will not vaccinate or offer medical treatment. This examination will determine if the animal presents a health or safety risk to any human or other animal. All proof of vaccinations must be presented at this time. Any animal deemed a risk to humans or other animals, due to illness or behavioral problems, will not be allowed to enter. It is imperative that your animal is clean, healthy, and that all vaccinations are up to date. It is within the County's sole discretion to determine whether any pet will be accepted at the PHEC.

Page 6 of 8



Items you must bring to the PHEC:

- Valid photo identification and recent utility bill showing current address for adult registrant
- Proof of all current required vaccinations for each pre-registered pet (list appears on page)
- All personal hygiene items, medications, and bedding supplies for each member of your family
- A three (3) day supply of non-perishable food and water for each member of your family and each pet; any medications for each pet.
- Appropriate bowls or dishes for each pet's food and water.
- Appropriate crate/cage for each pet; bedding (specifications are below).
- A sheet or other covering material for each crate to reduce the visual stimuli of the animal.
- A secure collar and sturdy leash for each dog.

Although we do not list numeric specifications for the size of any one crate or cage, the following criteria apply for dogs and cats:

Housing must be large enough to allow the animal to stand, turn around, and fully recline. It should be constructed of wire or heavy plastic and must be well ventilated. Crates/cages excessive in size and exercise pens are not allowed. Smaller dogs and cats may be housed together as a species as long as they are fully socialized and the provisions for movement are met for each animal.

All dogs must have the following current vaccinations:

Rabies  
Distemper/Parvo  
Bordetella  
Coronavirus

All cats must have the following current vaccinations:

Rabies  
Feline Leukemia  
Rhinitis  
Calicivirus  
Panleukopenia (distemper)

Ferrets: Housing for ferrets must allow ample room for movement, constructed of wire or heavy plastic, and allow for the appropriate bedding material without spillage. Up to three (3) ferrets may be housed together as long as they are fully socialized and the provisions for movement are met for each animal.

All ferrets must have the following current vaccinations:

Rabies  
Distemper



Small mammals: Housing for small mammals (gerbils, guinea pigs, hamsters, mice, rabbits, rats) that provides space for ample movement. Cages must be chew-proof, such as wire or plastic, and have a base deep enough to hold appropriate bedding. Small mammals normally housed together may stay together as long as the aforementioned provisions for movement are met for each animal.

Birds: Cages must allow for adequate movement, minimal flight and be fully ventilated. Up to three (3) birds may be housed together as long as they are fully socialized. Food and water dishes must be easily accessible and not require the opening of main access. Covers need to be provided to deter noise and reduce stress.

Thank you for pre-registering your family and pets. Please review all of the criteria listed in this packet before submitting and address any questions to Emergency Management at 305-289-6018.

Sincerely,

Irene Toner  
Director  
Monroe County Emergency Management

## **PET SHELTER VOLUNTEER FORMS**

Monroe County Emergency Management Department  
 Pet-Friendly Shelter Team  
 490 63<sup>rd</sup> Street Suite 150  
 Marathon, FL 33050  
 (305)289-6018

**NAME:**

The information in the box below is filled out the first time you volunteer. Then, each time you return, enter on the back side of this log your time in and time out. It is very important that these procedures are followed so that MCEMD can properly acknowledge volunteers for the work they have done, and to keep our internal records current. If you have any questions about the log, those working in the volunteer sign-in area will be glad to help you.

TODAY'S DATE:

ADDRESS:

STREET:

CITY / STATE / ZIP CODE:

HOME PHONE#

NAME OF EMERGENCY CONTACT PERSON

HAVE YOU COMPLETED THE MONROE COUNTY SHELTER MANAGER TRAINING?  YES  NO

IS THIS THE FIRST TIME YOU HAVE VOLUNTEERED WITH MCEMD?  YES  NO

**PLEASE NOTE: IT IS RECOMENDED THAT PET-SHELTER VOLUNTEERS ARE CURRENT ON THEIR TETANUS VACCINATION *BEFORE* THEY CAN START WORKING!**

CHECK WHICH OF THE FOLLOWING VACCINATIONS YOU ARE UP-TO-DATE ON:

TETANUS (DATE \_\_\_\_\_)  HEPATITIS A (DATE \_\_\_\_\_)  RABIES PRE-EXPOSURE (DATE \_\_\_\_\_)

HAVE YOU COMPLETED THE MONROE COUNTY VOLUNTEER REGISTRATION FORM?  YES  NO  
**IF NO, VOLUNTEERS MUST COMPLETE THIS FORM *BEFORE JOINING THE TEAM.***

DO YOU HAVE A CURRENT PICTURE I.D.?  YES  NO

\_\_\_\_\_  
 NAME OF EMERGENCY CONTACT PERSON

\_\_\_\_\_  
 RELATIONSHIP OF EMERGENCY CONTACT PERSON

\_\_\_\_\_  
 HOME PHONE NUMBER OF EMERGENCY CONTACT PERSON

**CHART USE ONLY**

<input type="checkbox"/> VOL APP	<input type="checkbox"/> CTY FORM	<input type="checkbox"/> EMG CONT	<input type="checkbox"/> PICT I.D	<input type="checkbox"/> CERT	<input type="checkbox"/> LTR	<input type="checkbox"/> TS	<input type="checkbox"/> WS INFO
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**SHELTER PHONE LOG  
FOR  
SHELTER MANAGER USE ONLY**



**SHELTER SUPPLY REQUEST FORM – FOR SHELTER MANAGER ONLY**



## **ACRONYMS**

## **Acronyms**

AEO – Animal Enforcement Officers  
EOC – Emergency Operation Center  
ESF – Emergency Support Function  
MCEM – Monroe County Emergency Management  
SM – Shelter Manager  
VET – Veterinarian  
VT – Veterinarian Technician  
KWHS – Key West High School  
SLS – Sugarloaf School  
SSS – Stanley Switlik School  
CSHS – Coral Shores High School  
FIU – Florida International University  
SOP – Standard Operating Procedure  
PFSP – Pet Friendly Shelter Plan  
SPCA – Society for the Protection of Cruelty to Animals  
PFST – Pet Friendly Shelter Teams

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