

BURIN PENINSULA S.P.C.A
SPAY & NEUTER ASSISTANCE PROGRAM (SNAP)

This program is funded through the generous support of the CanFel Foundation.

- SNAP is a program to help alleviate some of the financial burden of having dogs and cats spayed or neutered for qualifying applicants on the Burin Peninsula.
- SNAP is only available as funding permits. Please check <https://www.facebook.com/burinspca/> for notification.
- To verify annual family income applicants must submit copy(s) of the most current **Canada Revenue Agency Notice of Assessment** for all residing adults (18 and over) in your family. Please blot out Social Insurance Numbers on all copies before sending.
- Approval is not subject solely to financial information. Special circumstance may be considered. You may be required to provide additional personal information and documentation to confirm need.
- All copies of personal information will be kept confidential and destroyed after the application is processed.

How it works:

- 1) Submit your application and proof of income by email burinpeninsulaspca@gmail.com or by visiting the shelter between 12-2pm daily. Check our Facebook for unexpected closures.
- 2) Your application will be reviewed, and you will be notified if you are approved or not approved.
- 3) A fee must be paid within 2 weeks after notification of approval. We accept cash or EMT only.
- 4) We then consult with you and book your pets appointment with a participating vet clinic.
- 5) You will be responsible to transport your dog/cat safely in a carrier or by leash to the spay/neuter appointment. at your own expense.

Participating Veterinary Clinics:

Southern Animal Hospital, 20 Queen's St. Marystown, NL

Community Vet Hospital, 32 Wallace Rd, Milton, NL. (Just outside of Clarenville)

Clarenville Vet Hospital 101-47 Thompson St. Clarenville, NL

Restrictions: All veterinary appointments and inquiries are made by the BP SPCA. *The applicant **does not** contact the vet clinic regarding the SNAP. We are very thankful to the participating vet clinics who are donating discount fees so low rates can be passed on to applicants. Appointments can be cancelled up to one week prior to the appointment date without any financial penalty. **Any unattended appointments will result in your application being nullified and fees will not be reimbursed.***

Fees: Cats - \$85

Dog Neuter - \$180

Dog Spay - \$220 (less than 20kg), \$300 (20-40 kg) \$ 380 (over 40kg)

Your dog or cat can not be spayed or neutered through the prepaid SNAP if:

- It is determined to be pregnant.
- It has had a litter 2 months prior to the appointment date or is still lactating.
- It is sick or injured.
- Upon pre-operation assessment the veterinarian determines the pet is at surgical risk.
- It is a Cryptorchidic male (one testicle has not descended).
- It is less than 6 months old.

Please note:

- If pregnancy is not able to be determined until surgery has begun, litters will be aborted.
- You must agree to follow pre and post surgery care for your pet.
- The SNAP fee does not include **pre-anesthetic blood work**. This bloodwork allows your veterinarian to assess your pet's overall health, ensuring that your pet is a good candidate for anesthesia. You can request blood work for an **additional \$80 fee** that must be paid along with your SNAP fee. The vet clinic will be notified if you request blood work.

BURIN PENINSULA SPCA
Spay and Neuter Assistance Program Application

Fill in and provide ALL required information, failure to do so will result in rejection of application.

Name: _____ Date: _____

Spouse/Partner Name: _____

Address: _____

Contact Numbers: Home: _____

Cell: _____

Work: _____

Email Address: _____

1. Is this the first time you have applied to the SNAP program? Yes/No _____
Provide Date of Previous application and pet's name. _____

2. Is your COMBINED (all residing adults aged 18 and over) family income \$40, 000 or less? Yes/No _____

3. Are you a single with a net income of \$25, 000 or less? Yes/No _____

4. How many dependants are currently living with you? _____
Please list ages of all children under 18. _____

5. Have you provided copy(s) of all required current Revenue Canada Notice of Assessment? Yes/No _____

6. Please tell us why you are requesting this assistance:

7. Please answer the following questions regarding your pet:

Dog or Cat? _____ Name _____ Age: _____

Description: _____

Sex: Male/Female _____

Are you the owner of this pet? Yes/No _____

IF FEMALE: Has your pet ever had a litter? Yes/No _____

IF YES: Date of Birth: _____

Is your pet still nursing the litter? Yes/No _____

If your pet has ever visited a vet clinic please provide the name of the clinic, date of appointment and reason for the visit. _____

Is your dog/cat showing any signs of sickness which may include but is not limited to, drinking or peeing a lot, vomiting, diarrhea, rash, scratching/itching, weight loss, loss of appetite. Yes/No _____

Please list symptoms: _____

I hereby certify that the information I have provided is truthful and correct to the best of my knowledge. I hereby agree to waive any and all claims for damages against the Burin Peninsula SPCA, the Southern Animal Hospital, the Community Vet Hospital, or the Clarendville Vet Hospital and any officers, volunteers, or agents of the program in the event of death or injury to the animal during surgery.

Print name _____ Signature _____ Date _____