



**CAT TRAP PERMIT
FORM "C"**
as per Bylaw No. 364/16

Date: _____

Trap #: _____

Deposit: _____

(\$20.00 per trap)

I, the undersigned, agree to the following terms and conditions (please check off):

- The cat trap will be placed only on my property within the Town of Strasbourg.
- I will personally check the cat trap at least once every hour while the trap is set.
- When a cat is trapped, I will contact the Bylaw Enforcement Officer or Poundkeeper immediately.
- When a cat is trapped, I will treat the cat humanely. I will also provide shelter, food and water for the trapped cat. I will leave the cat in the trap and I will place the trap in a warm, dry and secure area (such as a shed, garage or basement) with a blanket placed over the trap to pacify the cat. If I cannot comply with these conditions, I will free the trapped cat unharmed.
- I will not allow harm to come to any trapped cat while in my possession including exposure to inclement weather I will not use the cat trap when the temperature falls below 0 degrees Celsius or rises above 28 degrees Celsius.
- I give my permission to a Bylaw Enforcement Officer or Poundkeeper to enter onto my property to ensure the cat trap is being used properly.
- I will advise the Bylaw Enforcement Officer, Poundkeeper, or Town Office of the name and address of the owner of the cat trapped.
- I will pay the cost to repair or replace the cat trap if the cat trap is damaged, lost, or stolen while in my possession. I understand my deposit will be kept in this instance.
- I will not set the trap on statutory holidays or days when the Town Office is closed.
- I will return the cat trap to the Town Office within three (3) days after the cat trap was issued, unless other arrangements are made with the Administration.

****IT IS A SERIOUS OFFENCE TO HARM ANY DOMESTIC ANIMAL****

I understand and accept all liability that may arise in connection with the use of this cat trap while it is in my possession and will save and indemnify the Town of Strasbourg for all such liability.

Signature: _____

Name: _____

Address of Intended Location of Trap: _____

TRAP RETURNED

Date: _____

Received By: _____

Remarks: _____
