

Vet Request Check List

for Love of Labs of Indiana Rescue

Applicant, please have your vet complete and submit this form. It can be submitted via
email to vetting@lolin.org or faxed to 1-801-640-7688.

IMPORTANT NOTE: If you have had a pet within the last 5 years, this form must be completed by your attending vet. Please send the FORM ONLY, not the medical history of each pet. Only send records if additional clarity is required in special circumstances.

Submitting Vet

Clinic Name:

Doctor Name:

Phone Number:

Pet/Owner Info

Pet Owner Name(s)

Pet Name(s)

Is the pet(s) spayed or neutered?

Yes

No

If NO, reason:

Have the pet(s) been tested annually in the past five years for heartworms?

Yes

No

If NO, why and what years were omitted?

Is the heartworm medication given monthly?

Yes

No

Type (brand) of heartworm monthly preventatives prescribed.

Is the pet(s) up-to-date on all required vaccinations: Rabies, Bordatella, DHPP?

Yes

No

If NO, please explain:

Additional comments / information:

Signed:

Date:

Title:
