

SPAY & NEUTER VOUCHER PROGRAM

S/N Voucher Eligibility

- Must be a resident of unincorporated Los Angeles County, or of a participating Contract City.
 - Participating Contract Cities: Baldwin Park, Bell, Calabasas, Compton, Monterey Park, Rolling Hills, Santa Clarita, Walnut, and West Hollywood.
- Must have proof of residency:
 - Government-issued identification with photo, and
 - Utility or Service bill

S/N Voucher Terms

- The SN Voucher goes toward the cost of Spay/Neuter surgery. Any amount in excess related to the cost of surgery or other needs will be the responsibility of the pet owner.
- SN Voucher Value:
 - Dog: \$100.00
 - Cat: \$ 50.00

Veterinary Providers

- Spay and Neuter services are provided by DACC's participating veterinary providers.
 - Our provider list will be emailed to you once your application has been approved.
- Voucher holders are responsible for contacting and making s/n appointments with the participating veterinary provider of their choice.
- Veterinary providers may require co-payments and/or offer other services.
- The Veterinarian-Client-Patient-Relationship (VCPR) is between the pet owner and the veterinary provider. All decisions pertaining to the care of the pet are exclusive to the established VCPR.
- Pet owners will be responsible for ensuring they get complete information, especially about associated costs and co-payment responsibilities.

How to Apply

- By Email: Send the completed application form with copies of eligibility documents to:
 SpayNeuterprogram@animalcare.lacounty.gov
- 2. By Fax: Send the completed application form with copies of eligibility documents to: 0 (562) 863-8052
- 3. By Mail: Send the completed application form and copies of eligibility to:

LACO Department of Animal Care & Control ATTN: SVNP 12440 E. Imperial Hwy. Suite 603 Norwalk, CA 90650

- For any questions and/or concerns regarding S/N Vouchers, please contact us at:
 - o **(562) 345-0321**
 - Monday-Friday, 8:00 a.m. to 4:00 p.m.
 - Closed all State Holidays



LACO DACC SPAY/NEUTER VOUCHER APPLICATION FORM

PET OWNER INFORMATION					
NAME:		PHONE:		CELL:	
ADDRESS:		CITY:		ZIP CODE:	
E-MAIL ADDRESS:					
PET INFORMATION (3 pet limit per household)					
NAME:	BREED:	COLOR:	AGE: V	WEIGHT:	SEX: M F
NAME:	BREED:	COLOR:	AGE: V	WEIGHT:	SEX: M F
NAME:	BREED:	COLOR:	AGE: V	WEIGHT:	SEX: M F
FOR OFFICE USE ONLY					
Date Application Received:		Application: Ap	proved 🗌 🛛 🛛	Denied 🗌	Initials:

Please make sure the following documents are attached to this application form:

- Valid Government-issued ID, and
- ➢ Utility or Service Bill



For Questions or Follow-ups, please call or email us at: • Ph: (562) 345-0321

• E-mail: SpayNeuterprogram@animalcare.lacounty.gov