

Linn County Sheriff's Office  
Tim K. Mueller - Sheriff  
Livestock Investigation Team  
Linn County Animal Rescue

PO Box 2669 Lebanon, Or 97355  
LCAR Equine Foster Application

Name \_\_\_\_\_ Drivers License # \_\_\_\_\_

Address \_\_\_\_\_

Mailing Address (If different from above) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

HomePhone \_\_\_\_\_ WorkPhone \_\_\_\_\_ CellPhone \_\_\_\_\_

Fax# \_\_\_\_\_ Email Address \_\_\_\_\_

\_\_\_\_\_

PLEASE ANSWER EACH OF THE FOLLOWING QUESTIONS (FAILURE TO PROVIDE ADEQUATE INFORMATION MAY DISQUALIFY YOU FROM THE FOSTER PROGRAM)

1. Date of Birth (Must be at least 18 years old) \_\_\_\_\_

2. a. Do you own/rent your house/property (please circle one)?

b. If rental, please provide the name and phone number of your landlord for their

approval: \_\_\_\_\_

3. Will the foster equine(s) be kept at the above address? \_\_\_\_\_

If not, where? \_\_\_\_\_

4. Please list all the animals you own and/or take care of: \_\_\_\_\_

\_\_\_\_\_

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5. What kind of equine are you willing to foster? Horse, donkey, mule: mare or gelding (circle)

6. How many rescued horses could you foster in case of an emergency? \_\_\_\_\_

7. I would be able to foster an equine that fits into the following criteria. (Please circle all that apply)

- \_\_\_\_\_ An equine with health problems
- \_\_\_\_\_ An equine with contagious health issues
- \_\_\_\_\_ An equine that is too young to ride (5 months to 2 years old)
- \_\_\_\_\_ An equine that is not trained or halter broke
- \_\_\_\_\_ An equine that cannot be ridden for any reason
- \_\_\_\_\_ An older equine (25 + years)
- \_\_\_\_\_ An equine that is in foal
- \_\_\_\_\_ An equine that was seized by the Sheriff's Office
- \_\_\_\_\_ An equine with serious conditions (Founder, Laminitis, Navicular, etc.)
- \_\_\_\_\_ A stallion (before geld) or a newly gelded equine

8. Do you have a serviceable horse/stock trailer? \_\_\_\_\_

9. Would you be willing to use your trailer to transport abused/neglected equine(s)?  
\_\_\_\_\_

10. Have you ever had an animal abuse investigator, animal control officer, or any other law enforcement official investigate an animal complaint against you: If so, what were the circumstances?

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11. Is there a possibility that you would want to eventually adopt the equine(s) you will be fostering? \_\_\_\_\_

(note: there is an adoption fee)

12. What is your equine(s) veterinarian's name and phone number? \_\_\_\_\_

\_\_\_\_\_  
( A call may be made to your veterinarian)

13. What is your Farrier's name, phone number and license number? (fosters must be seen by a licensed, certified , or approved professional) \_\_\_\_\_

\_\_\_\_\_  
14. How much pasture acreage do you have available for the fostered equine? (minimum 1/2 acres per horse) \_\_\_\_\_

15. Describe what kind of shelter do you have? (either a 10x10 stall or a 2 sided roofed shelter?) \_\_\_\_\_

16. Are stalls available? \_\_\_\_\_

17. What kind of fencing do you have? \_\_\_\_\_

18. Does any of it need to be repaired? If yes, when will repairs be finished? \_\_\_\_\_

\_\_\_\_\_  
19. Do you have the facilities to isolate the foster equine(s) from you own or other equine(s) even if temp? \_\_\_\_\_

20. What else would you like us to know about your property? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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21. Who will be responsible for the care of the foster animal? \_\_\_\_\_

22. What kind of storage and feeding receptacles will you use (must be off the ground)? \_\_\_\_\_

Note: Each individual equine will have a personalized ledger to be given with his/her new foster parent. It will contain any special needs we know about such as special feed requirements or personality traits. It will also serve as a place for the foster to keep records.

23. Do you worm/vaccinate the equine or have your veterinarian do it?(prior permission is needed to vaccinate) \_\_\_\_\_

24. Would you be able to let the equine be euthanized, if it was necessary? \_\_\_\_\_

25. You understand if this is a seized equine the courts might give it back to the owner? \_\_\_\_\_

26. You understand you do not own the fostered equine? \_\_\_\_\_

27. Do you have a basic knowledge of equine first aid, symptoms of colic, founder, etc? \_\_\_\_\_

\_\_\_\_\_

I believe all information supplied on this profile is true and correct. I know a property inspection, background check, and interview are required. I understand the Linn County Sheriff's Office or Linn County Animal Rescue is not responsible for any property or personal damage or wounds inflicted or illnesses caused by the fostering of this animal. I understand that fostering is not the same as ownership and there are restrictions that apply. I understand this is a voluntary arrangement and I am doing it without the expectations of gain. I know I am responsible for all costs of the care of the equine. There is no guarantee that this equine(s) will be adoptable by me. I know there is an adoption fee.

Signature \_\_\_\_\_ Date \_\_\_\_\_