



## PARISH HOUSEHOLD PET EVACUATION PLAN

Parish:				
<b>Head of OEP Contact Information</b>				
Contact Name:				
Mailing Address:		City:		State: Zip:
Work Phone:	Emergency Phone:		E-Mail:	
<b>Animal Control Contact</b>				
Contact Name:				
Mailing Address:		City:		State: Zip:
Work Phone:	Emergency Phone:		E-Mail:	
<b>Designated Authority for Large Animal Issues in the Parish</b>				
Contact Name:				
Physical Address:		City:		State: Zip:
Work Phone:	Emergency Phone:		E-Mail:	
<b>Designated Authority for Small Animal Issues in the Parish</b>				
Contact Name:				
Physical Address:		City:		State: Zip:
Work Phone:	Emergency Phone:		E-Mail:	
If this is a coastal parish or near-coastal parish, at what category storm will the parish likely call for a mandatory evacuation?				
Do you have a location for a co-located human/pet shelter in the parish? (examples include stockyards and agricultural facilities)			Yes	No
Location:		GPS Coordinates:		
Physical Address:		Contact Name:		
Facility Phone:	Emergency Phone:		E-Mail:	
Do you have an agreement to shelter pets with a host parish? (examples include stockyards and agricultural facilities)				
Location:		GPS Coordinates:		
Physical Address:		Contact Name:		
Facility Phone:	Emergency Phone:		E-Mail:	
Do you have a designated parish pick-up point?				
Location:		Yes No GPS Coordinates:		
Physical Address:		Contact Name:		
Facility Phone:	Emergency Phone:		E-Mail:	

Should this parish call a mandatory evacuation for any reason, will you need assistance from LDAF in transporting pets?			Yes	No
Should this parish call a mandatory evacuation for any reason, will you need assistance from LDAF in sheltering pets?			Yes	No
What type of assistance do you anticipate requesting?				
Total number of pets?	How many trucks needed?		How many vans needed?	
Will your parish need pet transport crates?	Yes	No	How many?	
Do you need soft sided carriers?	Yes	No	How many?	
Will you request LDAF to shelter the pets of the medical special needs population?			Yes	No
What type of pet registration does your parish use?			Computer Program	Hand-written
Unknown				
Does this parish have a written agreement (MOU, MOA) with a volunteer humane organization for assistance with pets for: Evacuation      Sheltering      Search and Rescue				
Name of Organization(s):				
Contact Name(s):		Contact Phone Number(s):		

This evacuation plan must be submitted ***annually by March 1<sup>st</sup> of each year*** to the Louisiana Department of Agriculture and Forestry, in accordance to Act 615 (SB607) 2006 Louisiana legislature regular session.

Please mail to:

Louisiana Department of Agriculture and Forestry  
Animal Health and Food Safety, Veterinary Health  
5825 Florida Blvd., Suite 4000  
Baton Rouge, LA 70806

Or Email to: [animalplan@ldaf.state.la.us](mailto:animalplan@ldaf.state.la.us)