

Grant ID: 1482

**Title of Proposal:** Friends of LIFE

**Agency Type:** Non-Profit

**Total Funding Requested:** \$25,000.00

**Check Payable To:** Paws2Help Inc

## Application Information

### Demographics

**Name of Applicant Agency:** Paws2Help

**Website Address:** www.Paws2Help.org

**Person Submitting Proposal:** Eve Van Engel

**Position:** Founder

**Agency Head:** Eve Van Engel

**Agency Head Email:** evehelps@yahoo.com

**Organization Business Address:** 2061 Indian Road

**City:** west Palm Beach

**State:** Florida

**Zip:** 33409

**Phone (xxx-xxx-xxxx):** 561-712-1911

**Fax:**

**Cell:** 561-371-0828

**Email Address:** clinic@paws2elp.org

### Agency Details

**Dates of Last Fiscal Year: Begin:** 07/01/13 **End:** 06/30/14

**Organization Income in Last Fiscal Year:** \$2,986,329.00

**Organization Expenses in Last Fiscal Year:** \$2,753,470.00

**Number of Paid Employees:** Full Time: 25 Part Time: 5

**Number of Active Volunteers:** 2

**Total Volunteer Hours per Week:** 20.00

**How did you learn of the 2009 Florida Animal Friend grant competition?** we received funds before

**Year(s) of previous Florida Animal Friend grants (if applicable):**

**Previous Florida Animal Friend Applications:** Years Funded: 2010 Year(s) denied/incomplete:

**Describe your agency:**

**Services Provided**

- Unlimited Intake Shelter
- Limited Intake Shelter
- Foster Network
- Animal Control
- Spay/Neuter Services

**Organization Structure:**

- City, county, or tribal agency
- Private nonprofit agency
- Other
- TNR Group
- Rescue Group

**Other**

**List your current board of directors:**

Name	Title	Phone	Occupation	Email
Elton Gissendanner, JDVM	Vice President	561-712-1911	Retired DVM	
Eve Van Engel	Secretary	561-371-0828	Manager	evehelps@yahoo.com
Sigrid Kumpe	President	561-308-2602	Manager	aton3@earhlink.net

**Applicant Qualifications**

**For your organization, in the last complete fiscal year:**

**0 cats and 0 dogs were admitted.**

**0 cats and 0 dogs were adopted.**

**0 cats and 0 dogs were euthanized.**

**1320 cats and 3280 dogs were sterilized.**

**Briefly describe your animal programs:**

**If your program performs adoptions, are all animals sterilized before adoption?**

Yes

**If not all, what percentage of animals are not currently sterilized before adoption?**

n/a

**If not all, how are animals selected for sterilization before adoption?**

we are no longer known as a rescue/shelter organization, we really now only run our veterinary clinics

**If not all, describe your sterilization policies and procedures for assuring sterilization after adoption:**

n/a

**Give additional background information on your organization's programs as they relate to this application and the qualifications of the personnel who will be in charge of this program. Show that you have the ability to carry out this program.**

Over 20 years in the business. Now, we have 2 clinics and shortly will have 3. All animals are in taken. We have licensed Vet Doctors who are up-dated every year by assisting to different programs, seminars, etc.

**If you currently have a program for sterilization of cats and/or dogs, describe your current level of funding and productivity and why additional resources are needed?**

Own resources

**Target Population**

<b>Geographical target area (name of city, county, etc.):</b>	33409, 33407, 33404
<b>Total human population in target area:</b>	102,436
<b>Percent of residents living below poverty in target area:</b>	19.4
<b>Estimated number of pet cats in target area (human population divided by 3.3):</b>	31042
<b>Estimated number of pet dogs in target area (human population divided by 4.0):</b>	25609
<b>Estimated number of feral cats in target area (human population divided by 6.0):</b>	17073
<b>Number of cats admitted to animal control shelters in the target area last year (if known)</b>	21,000
<b>Number of dogs admitted to animal control shelters in the target area last year (if known)</b>	25.000
<b>Number of cats euthanized in animal control shelters in the target area last</b>	10,000

year (if known)	19,000
Number of dogs euthanized in animal control shelters in the target area last year (if known)	20,000
<b>Please explain if you believe your target area animal population is significantly different than above.</b> I believe it is pretty general all over	
<b>Please explain what you believe are the most substantial sources of dog and cat overpopulation in the target area:</b> zip codes, 33407, 33409, 33404 are particularly low income areas and the people see many of the dogs as a means of income selling the puppies, we are over run with pit bulls and our ACC shelter houses mostly pit bulls hoping for adoption.	
<b>What kinds of spay/neuter services are currently available in the target area and in what ways are these resources currently insufficient to meet community needs?</b> Our ACC is no longer offering low cost spay/neuter due to budget costs. ARL does offer spay neuter services and sometimes are able to offer free sp/neuter for cats in targeted areas and it is making a difference in these areas.	
<b>Florida Animal Friend is highly supportive of proposals that are focused on animal populations that are identified as substantial sources of dog or cat overpopulation rather than being diluted over too broad of a geographic area or diverse animal populations. Describe the specific target animal population of the spay/neuter project proposed for this grant:</b> <input checked="" type="checkbox"/> Pets in low-income families <input checked="" type="checkbox"/> Pit Bull / large breed dogs <input type="checkbox"/> TNR managed colonies of feral cats <input checked="" type="checkbox"/> Community cats (free-roaming and/or owned) <input type="checkbox"/> Other	

### TNR Managed Colony Feral Cat Program/Community Cats (Free-Roaming and/or Owned) Program

**Define the precise boundaries of the colony or targeted area, including estimate of square miles.**

We help all the cats that are in our immediate area, at our locations which in West Palm Beach is a commercial area with several local restaurants. (2 sq. miles) We have a clinic in WPB, 33409, another office in 33406 which has a residential area right behind us, (1 sq.mile) Jupiter, 33477 is in a commercial strip mall and adjacent to two other plaza's housing many restaurants. 2 sq. miles. We have seen many cats roaming in all three locations and have

**What is the criteria used for determining the target area(s) and/or eligibility for this program?**

We have visually seen the cats, and cat feeders who have agreed to trap and bring to our clinics and return

**Describe whether the targeted area is rural, suburban, or urban. Is it commercial, residential, agricultural, or a designated special land use?**

Urban, commercial.

**Estimated number of cats in the target colony area :** 65

**Estimated number that are currently sterilized:** 40

**Projected reduction after utilizing the grant:** 20

**For TNR program, describe the ability to maintain lifelong care for remaining cats, commitment level of volunteers/organizations, etc.**

All of the cats that are trapped and fixed by our organization are fed nightly when our staff leave for the day, we are open seven days each week. Cats that are "on our doorstep" and brought into us for sterilization by their feeders will continue to be cared for by the persons who care for them now.

**Detail any public education/outreach, adoption programs, etc.**

**Do current city/county ordinances address TNR or free-roaming cats?**

Yes

**Please explain what is allowed:**

Caretakers of colonies are required to register with Animal Care and Control

**(NOTE: FAF will not fund any program this is inconsistent with local ordinances.)**

**For TNR program, list any groups or government agencies who support this TNR effort:**

Animal Care and Control

**Describe any effort to lessen the negative impact on local wildlife.**

Well fed cats, fed on a regular basis are less likely to stalk and kill birds. Once they are aware that they have a meal coming, one can almost set the clock by them waiting.

**Describe efforts that will be made to mitigate current or potential nuisance issues.**

Our "personal cats" i.e. the ferals that reside around our clinics are less likely to roam on neighboring property. we have had very few complaints from local businesses.

**Will the cats be ear-tipped?** Yes

**Will the cats be microchipped?** Yes

**Provide any additional information that will help the grant selection committee understand how this program will operate to achieve its goals.**

It will enable us to help more local feeders get their cats fixed. Obviously we provide the service free to ones that we personally trap outside of our properties. Unfortunately we do not have the staff to set traps other than outside our own buildings, but have been asked by local feeders to assist them, but more would do so if the price could be reduced by us for them.

## Objectives

**What do you hope to accomplish with these funds (objectives should be specific and quantifiable)?**

Our clinics are very busy every day, our WPB location sees on average 150 pets each day, we feel that while they are in the clinic, especially for wound repair or such we could convince them to spay/neuter for just \$25 more

**How does this program increase the number of sterilization surgeries above the existing baseline?**

We currently spay or neuter in our WPB location an average of 100 every week. By offering the surgery for just \$25 while they are already on the premises would increase the numbers significantly.

## Methods

**What criteria will you use to determine eligibility for your program?**

Any cat or dog at risk of reproducing especially those that we have already in the clinic for another need

**How will you advertise the program? Explain how the advertising will reach the target audience.**

We have over 2000 hits each day to our web site, and will inform people of the reduced fees available because of the grant received

**How will you address barriers to full use of the program such as transportation, illiteracy, and cultural hurdles?**

We have clients and volunteers who are often bringing in street animals, but are sometime limited by the costs. Our multi-lingual staff

**Does this project involve the transportation of animals by someone other than the client? If so, describe the vehicles, methods for confinement, personnel training, liability releases used to assure the safety of the animals and handlers.**

We have recently purchased an extended transport van, factory fitted with air conditioned cages and drains. We have all the restraining equipment necessary

# Veterinary Services

## Objectives

### What arrangements have you made with veterinarians to perform the surgeries?

We have an 8000 sq.ft hospital in West palm Beach with a 1,500 sq.ft. surgery area. Our Clinic in Jupiter is also fully fitted out to carry out multiple surgeries.

Are they:  In-house  Private Vet(s)  Combination

## Veterinary Practices

### Fee Range

What is the fee range to be paid for spay and neuter and what is the distribution to be paid by the client vs. the grant program? Keep in mind that Florida Animal Friend grant funds may only be used for costs directly associated with sterilization surgery (including anesthesia and pain control) and not for other items such as vaccines, testing, licensing, and capital purchases.

	Amount Paid by Client	Amount Paid by Project	Total Amount
Range for Male Cats	<input type="text" value="\$10.00"/>	<input type="text" value="\$20.00"/>	<input type="text" value="\$30.00"/>
Range for Female Cats	<input type="text" value="\$15.00"/>	<input type="text" value="\$25.00"/>	<input type="text" value="\$40.00"/>
Range for Male Dogs	<input type="text" value="\$20.00"/>	<input type="text" value="\$35.00"/>	<input type="text" value="\$55.00"/>
Range for Female Dogs	<input type="text" value="\$25.00"/>	<input type="text" value="\$40.00"/>	<input type="text" value="\$65.00"/>

Please check each item below to indicate additional services offered at the time of surgery, whether the client is required to pay for them, and if so what the fee is. For example, if an examination is required for surgery but is not charged to the client it would be marked: Required  Yes, Fee to client  No

	Required, Optional, or Not Offered	Fee to Client?
Examination	<input type="radio"/> Required <input checked="" type="radio"/> Optional <input type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
Rabies Vaccination if Due	<input checked="" type="radio"/> Required <input type="radio"/> Optional <input type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
Other Vaccination if Due	<input type="radio"/> Required <input checked="" type="radio"/> Optional <input type="radio"/> Not Available	<input type="radio"/> No <input checked="" type="radio"/> Yes <input type="text" value="\$15.00"/>
Pain Medication	<input type="radio"/> Required <input checked="" type="radio"/> Optional <input type="radio"/> Not Available	<input type="radio"/> No <input checked="" type="radio"/> Yes <input type="text" value="\$5.00"/>
Parasite Medication	<input checked="" type="radio"/> Required <input type="radio"/> Optional <input type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
Testing	<input type="radio"/> Required <input checked="" type="radio"/> Optional <input type="radio"/> Not Available	<input type="radio"/> No <input checked="" type="radio"/> Yes <input type="text" value="\$15.00"/>
Licensing	<input type="radio"/> Required <input type="radio"/> Optional <input checked="" type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
Ear tipping	<input checked="" type="radio"/> Required <input type="radio"/> Optional <input type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
Other	<input type="radio"/> Required <input type="radio"/> Optional <input checked="" type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes

### If necessary, please explain the procedures and fees described above:

Our current spay neuter services offered include a free microchip and rabies shot

Is this a voucher program? No

**If so, how will you assure compliance with the program?**

**For your voucher program, how have you determined the capacity of the veterinarians listed above to handle the projected capacity?**

**Will you have the ability to report the number of vouchers issued and the percentage that result in S/N surgeries?**

## Community Collaboration

To assure the success of your program, are there any local groups (such as rescue groups, animal control agencies, TNR groups, local businesses, local media, social service agencies, etc.) other than your organization and your cooperating veterinarians who are committed to assist?

Yes  No

Please list them and detail their level of involvement with the proposed effort.

Name	Level of Involvement
elders on the edge	a local government agency that assists elders in their programs with financial assistance with their pets In 2014 they assisted 18 persons

## Other Information

**Provide any additional information that will help the grant selection committee understand how the program will operate to achieve its goals.**

Paws2Help is dedicated to its mission, and since 2008 when we were the recipients of funding from a Will, we have plowed everything back into our organization and have grown from a one doctor practice in 2010 to today employing 8 full time veterinarians, and 3 part time ones, and now with the opening of additional offices we will be able to reduce our spay neuter waiting list.

## Budget

**Total number of sterilization surgeries projected:**

**Cats:** 250 **Dogs:** 400

**Total budget requested (Budget should not exceed \$25,000):** \$25,000.00

**Average cost/surgery projected:** \$39.00

**Describe any expenses that are not included in the grant and how they will be paid for:**

These additional surgeries would be "slotted in" to our daily schedules and therefore would not involve as such its own overhead. We could absorb the other fees in our daily operation costs

**Describe any expenses that are not included in the grant and how they will be paid for (for example, vaccines, microchipping, ear notching, etc.):**

These additional surgeries would be "slotted in" to our daily schedules and therefore would not involve as such its own overhead. We could absorb the other fees in our daily operation costs

**Describe any other funding sources for this program, i.e. other grants, targeted fundraising efforts, budget allocation, etc.**

As above stated due to the volume of animals that we serve we would be able to cover the additional costs involved. In the very near future we will be planning fundraising event and are hoping to be able to bring in a development manager

**What percent of the total cost of the program would this projected grant cover?**

100%

## Timeline

**All projects must be completed within 12 months of receipt of funding. Any unexpended funds must be refunded to Florida Animal Friend within 30 days of the end of the project. Requests for time extensions must be made in writing at least 30 days prior to the end of the project. Funding for accepted projects will be available after August 1, 2009.**

**Projected start date:** 08/17/15/    **Projected end date:** 07/30/16

### **Unexpended funds**

Any unexpended funds must be refunded to Florida Animal Friend within 30 days of the end of the project.

### **Requests for extensions**

Requests for time extensions are discouraged and not often granted. If it is imperative to request an extension, such request must be made in writing at least 30 days prior to the end of the project. It is FAF's policy to seldom grant more than a 30-60 day extension.

Failure to submit reports and requests within the required time period will impact your agency's future grant applications.

## Future Funding to Sustain Public Spay/Neuter

**\*Explain how the organization plans to fund this program in the future. Having sustainable plans including other grants, local donations and other services generating revenue enhances the chances of receiving this grant.**

We are working with our local Mercedes dealership with a mail out campaign and also intend to work with information passed through WoofGang stores. We are also intending to request donations connected to the local Count Down to Zero campaign

## Promotion of Florida Animal Friend Spay/Neuter License Plate

**\*Applicants selected for funding are expected to publicize their grant in support of their spay/neuter program and promote the sale of the Animal Friend license plate via press releases, newsletters, website links, social media, etc. Please describe your plan to promote the Florida Animal Friend Spay/Neuter License Plate. Grantees are required to submit documentation of promotional endeavors.**

We have the plate information on our home page of our web site. We print the link on every invoice that we print out in the clinic, which is around 1,400 per week. All 9 of our company vehicles have the plates on, and also 8 of our staff members proudly display the animal friend plates. We will also have the information put into the artwork that will wrap our new transport van.