

Grant ID: 2038

**Title of Proposal:** Spay Now or Pay Later**Agency Type:** Municipal**Total Funding Requested:** \$25,000.00**Check Payable To:** Santa Rosa County Animal Services

## Application Information

### Demographics

**Name of Applicant Agency:** Santa Rosa County Animal Services**Website** www.santarosa.fl.gov/animals  
**Address:****Person Submitting Proposal:** Tara Deaguilera**Position:** Rescue Coordinator**Person Submitting Proposal Email Address:** tarad@santarosa.fl.gov**Agency Head** Dr Megan Arevalo  
**Agency**  
**Head** srcvet@santarosa.fl.gov  
**Email:****Organization Business Address:** 4451 Pine Forest Rd Milton FL 32583**City:** Milton**State:** FL**Zip:** 32583**Phone (xxx-xxx-xxxx):** 850-983-4680**Fax:****Cell:** 850-530-5128

### Agency Details

**Date of 501(c)(3) Incorporation:****Dates of Last Fiscal Year:** Begin: 10/01/20 End: 09/30/21**Organization Income in Last Fiscal Year:** \$1,997,085.00**Organization Expenses in Last Fiscal Year:** \$1,997,085.00**Number of Paid Employees:** Full Time: 23 Part Time: 2**Number of Active Volunteers:** 38**Total Volunteer Hours per Week:** 35.00**How did you learn of the 2009 Florida Animal Friend grant competition?** Previous recipient.**Year(s) of previous Florida Animal Friend grants (if applicable):****Previous Florida Animal Friend Applications:** Years Funded: 2010, 2012, 2014, 2018, 2020 Year(s) denied/incomplete: 2009, 2016**Auto-Generated (Previous Applications):**

Grant #	Proposal Year	Proposal Title	Status
55	2009	Santa Rosa Animal Friend	Denied
123	2010	A HELPING HAND FOR PAWS AND PURRS	Funded
301	2012	One Pet at a Time	Funded

1397	2014	BE A PET CHAMPION	Funded
1608	2007		Funded
1684	2016	Spay and Neuter Is A Lifesaver	Denied
1812	2018	Litter Free Is The Way To Be	Funded
1920	2020	SRC Community Cat Program	Funded
2038	2022	Spay Now or Pay Later	Funded

**Describe your Organization:****Services Provided**

- Open Admission Intake Shelter
- Limited Intake Shelter
- Foster Network
- Animal Control
- Spay/Neuter Services
- Other

**Organization Structure:**

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

**List your current board of directors:****Applicant Qualifications****For your organization, in the last complete fiscal year:****1987 cats and 1263 dogs were admitted.****900 cats and 548 dogs were adopted.****62 cats and 43 dogs were euthanized.****1508 cats and 524 dogs were sterilized.****Briefly describe your animal programs:**

- |   |  |   |   |
|---|--|---|---|
| <input checked="" type="checkbox"/> Stray/Lost pet intake     | <input checked="" type="checkbox"/> Foster Program | <input type="checkbox"/> Wellness services to understand pet owners | <input checked="" type="checkbox"/> Volunteer Program   |
| <input checked="" type="checkbox"/> Owner surrendered animals | <input type="checkbox"/> Food Bank                 | <input type="checkbox"/> Cruelty investigation                      | <input type="checkbox"/> High volume spay/neuter clinic |
| <input checked="" type="checkbox"/> Lost and Found Program    | <input type="checkbox"/> Behavior counseling       | <input checked="" type="checkbox"/> Enforcement of ordinances       | <input type="checkbox"/> Full service wellness clinic   |
| <input checked="" type="checkbox"/> Adoption Program          | <input type="checkbox"/> Disaster services         |   |   |

**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?**

n/a

**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.**

Our organization has made great strides in the last 3 years. The staff and management has implemented many changes. We were one of the highest euthanasia shelters in the state, and now we are at a no kill status. One of our top priorities was to address cat overpopulation. With grant funding from Florida Animal Friends, we were able to successfully alter 300 cats. Our staff is experienced with the community cat program and will be able to implement this program with success given the opportunity.

**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?**

We currently spay/neuter our adoptable dogs and cats. We are also altering a small amount of community cats, but we see the need

is great and our funding currently does not support a large amount of surgeries. With additional funding from grants such Florida Animal Friends, we will be able to tackle the issue of community cat pet overpopulation without taking money from other areas such as our Partners For Pets fund, which handles medical emergencies and various medical care.

**Florida Animal Friend grants are for low-cost and/or no-cost spay/neuter programs; If you currently have such a program, please describe**

We currently do not have a spay/neuter program at this time.

**Number of animals sterilized in that program in the past year:**

Cats: Dogs:

## Target Population

<b>Geographical target area (name of city, county, zip codes, geographical Information service (GIS), etc.):</b>	Santa Rosa County FL
<b>Total human population in target area:</b>	188,000
<b>Percent of residents living below poverty in target area:</b>	9.4
<b>Estimated number of pet cats in target area (human population divided by 3.3):</b>	56970
<b>Estimated number of pet dogs in target area (human population divided by 4.0):</b>	47000
<b>Estimated number of feral cats in target area (human population divided by 6.0):</b>	31334
<b>Number of cats admitted to animal control shelters in the target area last year (if known)</b>	1950
<b>Number of dogs admitted to animal control shelters in the target area last year (if known)</b>	1252
<b>Number of cats euthanized in animal control shelters in the target area last year (if known)</b>	70
<b>Number of dogs euthanized in animal control shelters in the target area last year (if known)</b>	51

**Please explain if you believe your target area animal population is significantly different than above.**

We have listed our entire county as the target area due to the overpopulation of felines in every corner of our geographic area.

**Please explain what you believe are the most substantial sources of dog and cat overpopulation in the target area:**

We believe that community cats are the most substantial source of cat overpopulation in our county.

**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?**

There are currently no low cost spay/neuter programs in our county. Citizens have to travel out of the county and sometimes even out of state in order to obtain these lifesaving services at an affordable fee.

**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(s) of the spay/neuter project proposed for this grant:**

- Pets in low-income families  Pit Bull / large breed dogs  TNR managed colonies of feral cats  Community cats (free-roaming and/or owned)  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.**

This community cat program would cover our entire county, which is approximately 1100 square miles. There are so many citizens who are in need of assistance, so we did not want to limit it to one particular area or neighborhood.

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

The citizen must reside in Santa Rosa County. The community cat must also live within our county. There must be a citizen willing to be responsible for making sure the cat gets brought in for their appointment and retrieved so that they may return to their area.

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

We have a large rural area in our community, and we do see a large amount of community cats in these areas. However, we have set the entire area as our targeted location, due to the widespread problem of cat overpopulation.

**Estimated number of cats in the target colony area : 88000****Estimated number that are currently sterilized: 50000****Projected reduction after utilizing the grant: 500****For TNR program, describe the ability to maintain lifelong care for remaining cats, commitment level of volunteers/organizations, etc.**

n/a

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

Yes

**Please explain what is allowed:**

Our county ordinance states that community cats are exempt from any leash laws. This allows the citizens to feel comfortable participating in community cat spay/neuters without fear of any penalty.

**(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:**

n/a

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

Our organization offers educational information to citizens that are concerned about how to reduce any impact on wildlife from community cats.

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

Nuisance issues usually stem from intact males spraying areas for territory or fighting other cats. Female cats in season are also a nuisance. By educating the public on how spay/neuter can solve these issues, we feel more citizens will be supportive of community cats. For those who still have issues, we offer information that can help them make safe changes to deter cats in their areas if necessary. We also work with citizens if there is a particular cat that is a problem at a certain spot.

**Will the cats be ear-tipped? Yes****Will the cats be microchipped? No****Provide any additional information that will help the grant selection committee understand how this program will operate to achieve its goals.**

Our organization will be able to use our contract veterinarian, who performs surgeries on site, to perform the spay/neuter surgeries for our community cat program. This allows us to save staff time and hours by scheduling these surgeries directly instead of outsourcing them to local veterinarians, who generally have a wait time of 2-4 weeks. Our staff is set up for continuing the community cat program and setting aside a specific day for these surgeries so that the program is successful.

## Objectives

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

With this lifesaving grant, we hope to provide surgeries to 500 community cats in our county. These are cats that will be in the community reproducing and adding to our pet overpopulation without intervention. This will prevent thousands more cats from overpopulating our area in the future. 500 cats is a substantial amount of animals to be altered in one year. In addition to our tnr efforts, we feel this will really make a solid difference in our county. We plan to continue this concentrated effort, as we know first hand that overpopulation is a life or death issue for these animals.

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

Without this program, we feel that the majority of these cats will not be altered. This is why we offer this at no cost to the community. While a citizen may not have a problem putting out food for a community cat, they may not have funding to have the

animal altered or vaccinated. These 500 surgeries will provide assistance for citizens that want to support community cats without the financial means to do so.

## Methods

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

Our organization will have a simple criteria to determine eligibility. The citizen must be from Santa Rosa County, as well as the community cat in question. We keep it simple so that citizens will be more inclined to participate , and it also makes it easier for staff to get the surgeries scheduled.

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

Our main advertisement will come from our website and facebook page. We have a large social media presence and this really gets the word out. We will also send out information to our public information officer, which shares this with local media outlets. Our local news channel is fantastic about showcasing any exciting news such as a community cat spay/neuter opportunity.

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

Our organization has worked hard to break down any barriers between our staff and citizens. Our staff is more than willing to offer any assistance needed to anyone needing help. In our minds, if we can help the citizen and they are willing to help the cat, it is a win on both sides.

### **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 set up our community cat program so that the citizen is required to bring the cat in as well as pick up. While our officers may work a specific location to assist a citizen, they can only do that on a limited basis due to staffing. So ideally, the citizen participating would be responsible for bringing in the community cat in for surgery.

## Veterinary Services

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

We have a contract veterinarian that performs our spay/neuters for adoption animals. Last year we were very successful in having specific community cat days for surgeries. This allowed us to allot a scheduled amount of surgeries so that we could use all of our funding.

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, which is required) and not for other items such as testing, licensing, and capital purchases. However, \$2 per animal of grant funds can be used for rabies vaccination.

	<b>Amount Paid by Client</b>	<b>Amount Paid by Project</b>	<b>Total Amount</b>
<b>Range for Male Cats</b>	\$0.00	\$50.00	\$50.00
<b>Range for Female Cats</b>	\$0.00	\$50.00	\$50.00
<b>Range for Male Dogs</b>	\$0.00	\$0.00	\$0.00
<b>Range for Female Dogs</b>	\$0.00	\$0.00	\$0.00

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

	<b>Required, Optional, or Not Offered</b>	<b>Fee to Client?</b>
<b>Examination</b>	<input checked="" type="radio"/> Required <input type="radio"/> Optional <input type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
<b>Rabies Vaccination if Due</b>	<input checked="" type="radio"/> Required <input type="radio"/> Optional <input type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
<b>Other Vaccination if Due</b>	<input checked="" type="radio"/> Required <input type="radio"/> Optional <input type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
<b>Pain Medication</b>	<input checked="" type="radio"/> Required <input type="radio"/> Optional <input type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
<b>Parasite Medication</b>	<input type="radio"/> Required <input type="radio"/> Optional <input checked="" type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
<b>HW Testing</b>	<input type="radio"/> Required <input type="radio"/> Optional <input checked="" type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
<b>Feline Leuk/FIV</b>	<input type="radio"/> Required <input type="radio"/> Optional <input checked="" type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
<b>County License</b>	<input type="radio"/> Required <input type="radio"/> Optional <input checked="" type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
<b>Ear tipping</b>	<input checked="" type="radio"/> Required <input type="radio"/> Optional <input type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
<b>Microchip</b>	<input type="radio"/> Required <input type="radio"/> Optional <input checked="" type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes
<b>Other</b>	<input type="radio"/> Required <input type="radio"/> Optional <input checked="" type="radio"/> Not Available	<input checked="" type="radio"/> No <input type="radio"/> Yes

**None of the anticipated grant funds can be used for any of the above services, except for pain medication which is required and \$2 per animal for rabies vaccination.**

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

Each animal in the community cat program will receive an examination, rabies vaccination, fvrcp vaccination, and ear tip with their surgery. If there are any additional medical issues, we will treat accordingly at no cost to the citizen.

**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
A HOPE	A Hope, Inc. has always been a huge supporter of our shelter. They will not have a specific role in this grant, but will be very important in sharing this information to citizens who need assistance. They currently have a low cost spay/neuter program where they travel out of the area to take animals to be altered. They are our go to for referring citizens who need help. If we are able to receive grant funding, we are certain they will work with us to send citizens in need of help to our organization. They have been instrumental in making positive changes to our save rate here at the shelter,, and we know we can count on their support for getting this information out to citizens in need.

## Other Information

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

Our organization is ready to offer this opportunity to our citizens. Our staff embraced the community cat program, and everyone is on board. Our surgery coordinator has an excellent system. She gets the cat checked and sent back to surgery. She also takes care of all record keeping in regards to the community cat. We have set drop off and pick up times so that it is easy and streamlined. Each animal is altered, ear tipped, vaccinated, and ready to return to its neighborhood a better neighbor!

## Budget

**Total number of sterilization surgeries projected:**

Cats: 500 Dogs: 0

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

**Average cost/surgery projected:** \$50.00

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

In addition to the spay/neuter surgery, our surgery staff also does a rabies vaccination, fvrcp vaccination, and ear tipping on each cat. Any additional medical issue is also taken care of this that time.

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

We have a Partners For Pets fund that allows us to utilize funds for any medical needs for animals in our care, so this covers any additional costs. We also are doing community cats now but on a smaller scale, as we currently do not have dedicated funding for this program.

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

75

/td>

**All projects must be completed within 12 months of receipt of funding, with the final report submitted no later than September 1 of the following year.**

**Projected start date:** 09/01/22/    **Projected end date:** 08/01/23

**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 currently utilizing some of our funding in Partners For Pets program to do a small amount of community cats. During our last grant funding from Florida Animal Friends, we were able to alter 300 cats. We continued that with additional funding from other areas, and continued our program. We saw the need in our community and are committed to providing this lifesaving surgery. We will continue to apply for grant funding in other areas, as well as requesting additional funding from our county to continue this important program.

## 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 with their final report.**

**We support the Florida Animal Friends license plate by promoting this on our web page as well as our social media outlets. We discuss it on our Facebook videos as well as displaying educational information about this fantastic program in our shelter. Our staff is always extremely vocal about how easy it is to support spay/neuter by simply**

**purchasing this license plate.**

**Number of FAF specialty plates on vehicles of staff and/or volunteers:**

**6**