

**STATEMENT OF ENFORCEMENT  
OF LOCAL RABIES CONTROL ACTIVITIES**  
Completed Form to be Forwarded to the Local Health Officer

This Statement of Enforcement of Rabies Control Requirements is for the Declared "Rabies Endemic Area" described below:

SAN DIEGO COUNTY Effective APRIL 21, 2010  
(County) (Date)  
UNINCORPORATED AREAS OF SAN DIEGO COUNTY AND THE CITIES OF  
CARLSBAD, DEL MAR, ENCINITAS, SANTEE, SOLANA BEACH AND CITY OF  
SAN DIEGO.  
Specify the Area or Jurisdiction for Which this Statement is Made

In accordance with Section 121585 and 121690 of the California Health and Safety Code, and upon the declaration of the Director of Public Health that all California counties are "Rabies Areas", the following statutory and regulatory programs must have continued enforcement in your jurisdiction:

1. The owner of every dog over four months of age shall ensure that their animal is currently vaccinated for rabies and licensed. Dogs less than four months of age must be kept at home, or supervised on leash.
2. An animal/rabies control program must be implemented on a county-wide basis to include an animal pound system, animal bite reporting, and stray animal control.
3. The county and or city shall provide or arrange for "Actual Cost" canine rabies vaccination clinics. The Department of Public Health approved "actual cost" vaccination fee in 2010 is \$6.00 per dog.
4. The county and or city shall conduct a rabies control program (rabies investigations, animal quarantines, etc.) for the purpose of carrying out and enforcing the provisions of the California rabies control laws and regulations.

**PLEASE INDICATE BY ENDORSEMENT BELOW  
AREA OR JURISDICTION COMPLIANCE WITH THE REQUIREMENTS OF  
THE CALIFORNIA RABIES CONTROL PROGRAM**

Person responsible for conducting the Rabies  
Control Program in the jurisdiction or area:

Date: APRIL 21, 2010

Signature: 

Name (print): DAWN DANIELSON, RVT

Title: DIRECTOR

Address: 5480 Gaines St.  
San Diego, CA 92110

Telephone: (619) 767-2605

Endorsement by local Health Officer  
or authorized representative:

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Name (print): \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Local Health Departments: Please forward the endorsed form to the Department of Public Health, Veterinary Public Health Section, MS 7308, P. O. Box 997377, Sacramento, CA 95899-7377, Telephone (916) 552-9740, Fax (916) 552-9725

# ANNUAL REPORT OF LOCAL RABIES CONTROL ACTIVITIES

For January Through December, 2009

Jurisdiction for which this report is made:

UNINCORPORATED AREAS OF SAN DIEGO COUNTY AND THE CITIES OF CARLSBAD, DEL MAR, ENCINITAS, SANTEE, SOLANA BEACH AND CITY OF SAN DIEGO.

Note: If report for any item is "none" or "zero", so indicate

		NUMBER	
RABIES VACCINATION AND LICENSING	A. Number of "Actual Cost" rabies public vaccination clinics held	780	
	B. Number of animal control citations issued for rabies vaccination and licensing violations	262	
		Dogs	Cats
	C. Dogs and cats vaccinated in "Actual Cost" public vaccination clinics	6,056	110
	D. Dogs and cats licensed in "Actual Cost" public vaccination clinics	6,140	0
CANINE AND FELINE RABIES CONTROL	E. Total number of dogs and cats LICENSED in jurisdiction	77,201	0
	F. Dogs and cats on hand in the shelter January 1, 2009 (carried over from 2008)	434	262
	G. Dogs and cats entering the shelter, TOTAL: (Total should equal the sum of 1 to 5 below)	12,613	10,663
	1. Dogs and cats captured by Animal Control Officers	6,364	2,060
	2. Dogs and cats surrendered by owners (not including those surrendered for quarantine)	1,964	1,083
	3. Dogs and cats surrendered by the public G1 THROUGH G5	3,920	7,413
	4. Dogs and cats impounded for animal bite quarantines ARE	193	8
	5. Dogs and cats transferred from another shelter MUTUALLY EXCLUSIVE	172	99
	H. Disposition of dogs and cats entering shelter, TOTAL: (Total should equal the sum of 1 to 6 below)	12,529	10,541
	1. Dogs and cats reclaimed by owner	3,997	312
	2. Dogs and cats adopted by new owners H1 THROUGH H6	6,123	4,667
	3. Dogs and cats euthanized ARE	2,191	5,319
	4. Dogs and cats that died of other causes MUTUALLY EXCLUSIVE	36	118
	5. Dogs and cats stolen, escaped, etc.	3	25
	6. Dogs and cats transferred to another shelter	179	100
	I. Dead dogs and cats collected (excluding F, G and H above).	250	110
	J. Dogs and cats on hand in the shelter December 31, 2009 (carried over to 2010)	518	384
ANIMAL BITE REPORTING	K. Animal bites reported, TOTAL: (Total should be the sum of 1 and 2 below)	3234	
		Dogs	Cats
	1. DOG and CAT bites reported, TOTAL: (Total should be the sum of a, b, c, and d below)	2,705	507
	a. Licensed	651	0
	b. Vaccinated only	1	0
	c. Neither licensed or vaccinated (but owned)	1,872	455
	d. Strays	181	52
	2. OTHER ANIMAL bites reported, TOTAL: (Total should be the sum of a and b below)	22	
	a. Other domestics (excluding cats)	6	
	b. Wild	16	

Please Complete Reverse

CDPH, DCDC, VPHS 2007

		NUMBER	
		Dogs	Cats
ANIMAL QUARANTINES	L. Number of 30 day quarantines for vaccinated dogs and cats exposed to potentially rabid animals	0	0
	M. Number of 6 month quarantines for unvaccinated dogs and cats exposed to potentially rabid animals	0	0
	N. Number of 6 month quarantines for domestic livestock (horses, cattle, etc.) exposed to potentially rabid animals	0	
	O. Number of 30 day or 6 month quarantines not completed because animals were euthanized	0	
AGENCY ADMIN	P. Number of animal control officers employed in jurisdiction	31	
	Q. Name of agency or organization responsible for rabies control activities in this jurisdiction:  County of San Diego, Department of Animal Services  Address: 5480 Gaines St., San Diego, CA 92110-2867  Phone: (619) 767-2605		

Completed by:

Endorsement by local Health Officer or  
authorized representative:

Signature: 

Signature: \_\_\_\_\_

Name (print): DAWN DANIELSON, RVT

Name (print): \_\_\_\_\_

Title: Director

Title: \_\_\_\_\_

Agency: County of San Diego  
Department of Animal Services

Agency: \_\_\_\_\_

Telephone: (619) 767-2605

Telephone: \_\_\_\_\_

Email: DAWN.DANIELSON@SDCOUNTY.CA.GOV

Email: \_\_\_\_\_

AFTER ENDORSEMENT  
PLEASE FORWARD COMPLETED FORM TO:

California Department of Public Health  
Veterinary Public Health Section  
MS 7308

P. O. Box 997377  
Sacramento, CA 95899-7377

PHONE: (916) 552-9740  
FAX: (916) 552-9725

# ANNUAL REPORT OF LOCAL RABIES CONTROL ACTIVITIES

For January Through December, 2009

Jurisdiction For Which this report is made: Chula Vista, Lemon Grove, Imperial Beach

Note if report for any item is "none" or "zero", so indicate

Number

<b>RABIES VACCINATION AND LICENSING</b>	A. Number of "Actual Cost" rabies public vaccination clinics held	104	
	B. Number of animal control citations issued for rabies vaccination and licensing violations	35	
		Dogs	Cats
	C. Dogs and cats vaccinated in "Actual Cost" public vaccination clinics.	2,024	1
	D. Dogs and cats licensed in "Actual Cost" public vaccination clinics.	1,050	0
<b>CANINE AND FELINE RABIES CONTROL</b>	E. Total numbers of dogs and cats <b>LICENSED</b> in jurisdiction	10,783	0
	F. Dogs and Cats on hand in the shelter January 1, 2009 (carried over from 2008)	137	169
	G. Dogs and cats entering the shelter, TOTAL: (Total should equal sum of 1 to 5 below)	3,215	3,855
	1. Dogs and cats captured by Animal Control Officers	1,111	580
	2. Dogs and cats surrendered by owners (not including those surrendered for quarantine)	663	364
	3. Dogs and cats surrendered by the public <b>G1 THROUGH G5</b>	1,396	2,907
	4. Dogs and cats impounded for animal bite quarantines <b>ARE</b>	44	4
	5. Dogs and cats transferred from another shelter <b>MUTUALLY EXCLUSIVE</b>	1	0
	H. Disposition of dogs and cats entering shelter, TOTAL: (Total should equal the sum of 1 to 6 below)	3,307	3,933
	1. Dogs and cats reclaimed by owner	908	36
	2. Dogs and cats adopted by new owners <b>H1 THROUGH H6</b>	1,381	1,197
	3. Dogs and cats euthanized <b>ARE</b>	921	2,388
	4. Dogs and cats that died of other causes <b>MUTUALLY EXCLUSIVE</b>	9	23
	5. Dogs and cats stolen, escaped, etc.	10	83
	6. Dogs and cats transferred to another shelter	78	206
<b>Animal Bite Reporting</b>	I. Dead dogs and cats collected (excluding F, G, and H above).	54	97
	J. Dogs and cats on hand in the shelter December 31, 2009 (carried over to 2010)	98	78
	K. Animal bites reported, TOTAL : (Total should be the sum of a,b,c, and d below)	296	
		Dogs	Cats
	1. DOG and CAT bites reported, TOTAL : (Total should be the sum of a, b, c and below)	253	43
	a. Licensed	69	0
	b. Vaccinated Only	0	0
	c. Neither licensed or vaccinated (but owned)	148	2
	d. Strays	36	41
	2. OTHER ANIMAL bites reported, TOTAL : (Total should be the sum of a and b below)	0	
	a. Other domestics (excluding cats)	0	
	b. Wild	0	

		Dogs	Cats
ANIMAL QUARAN TINES	L. Number of 30 day quarantines for vaccinated dogs and cats exposed to potentially rabid animals.	0	0
	M. Number of 6 month quarantines for unvaccinated dogs and cats exposed to potentially rabid animals.	0	0
	N. Number of 6 month quarantines for unvaccinated dogs and cats exposed to potentially rabid animals.	0	
	O. Number of 30 day or 6 month quarantines for domestic livestock (horses, cattle, etc.) exposed to potentially rabid animals.	0	
AGENCY ADMIN	P. Number of animal control officers employed in jurisdiction	4	
	Q. Number of agency or organization responsible for rabies control activities in this jurisdiction: Chula Vista Animal Care Facility Address: 130 Beyer Way Chula Vista, CA 91911 Phone: (619) 476-2477		

Completed by:

Signature:

Name (print): Cindy Silvas

Title: Office Specialist

Agency: Chula Vista Animal Care Facility

Telephone: (619) 476-2476

Email: Csilvas@ci.chula-vista.ca.us

Endorsement by local Health Officer or

Authorized representative:

Signature:

Name (print): Mariya G. Anton

Title: Animal Care Facility Mgr

Agency: Chula Vista Animal Care Facility

Telephone: 619 476 2480

Email: manton@ci.chula-vista.ca.us

AFTER ENDORSEMENT  
 PLEASE FORWARD COMPLETED FORM TO  
 California Department of Health Services  
 Veterinary Public Health Section  
 MS 7308  
 P.O. Box 997413  
 Sacramento, CA 95899-7413

PHONE: (916) 552-9740

FAX: (916) 552-9725

02/12/2010 16:30 FAX 8585714268

COUNTYVET

State of California - Health and Human Services Agency

California Department of Public Health  
Veterinary Public Health Section

# STATEMENT OF ENFORCEMENT OF LOCAL RABIES CONTROL ACTIVITIES

Completed Form to be Forwarded to the Local Health Officer

This Statement of Enforcement of Rabies Control Requirements is for the Declared "Rabies Endemic Area" described below:

SAN DIEGO  
(County)

Effective 1-1-2010  
(Date)

CITY OF CORONADO  
Specify the Area or Jurisdiction for which this Statement is Made

In accordance with Section 121585 and 121690 of the California Health and Safety Code, and upon the declaration of the Director of Public Health that all California counties are "Rabies Areas", the following statutory and regulatory programs must have continued enforcement in your jurisdiction:

1. The owner of every dog over four months of age shall ensure that their animal is currently vaccinated for rabies and licensed. Dogs less than four months of age must be kept at home, or supervised on leash.
2. An animal/rabies control program must be implemented on a county-wide basis to include an animal pound system, animal bite reporting, and stray animal control.
3. The county and or city shall provide or arrange for "Actual Cost" canine rabies vaccination clinics. The Department of Public Health approved "actual cost" vaccination fee in 2010 is \$6.00 per dog.
4. The county and or city shall conduct a rabies control program (rabies investigations, animal quarantines, etc.) for the purpose of carrying out and enforcing the provisions of the California rabies control laws and regulations.

## PLEASE INDICATE BY ENDORSEMENT BELOW AREA OF JURISDICTION COMPLIANCE WITH THE REQUIREMENTS OF THE CALIFORNIA RABIES CONTROL PROGRAM

Person responsible for conducting the Rabies  
Control Program in the jurisdiction or area:

Date: 2-28-10  
Signature: [Signature]  
Name (print): MARK C. STAHL  
Title: ANIMAL SERVICES OFFICER  
Address: 700 ORANGE AVE  
CORONADO, CA  
Telephone: (619) 522-7371

Endorsement by local Health Officer  
or authorized representative:

Date: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Name (print): \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_

Local Health Departments: Please forward this endorsed form to the Department of Public Health, Veterinary Public Health Section, MS 7303, P.O. Box 997377, Sacramento, CA 95899-7377, Telephone (916) 552-9740, Fax (916) 552-9725

02/12/2010 16:31 FAX 8585714268

COUNTYVET

# ANNUAL REPORT OF LOCAL RABIES CONTROL ACTIVITIES

For January Through December, 2009

Jurisdiction for which this report is made:

Note: If report for any item is "none" or "zero", so indicate

		NUMBER		
		Dogs	Cats	
RABIES VACCINATION AND LICENSING	A. Number of "Actual Cost" rabies public vaccination clinics held			
	B. Number of animal control citations issued for rabies vaccination and licensing violations			
	C. Dogs and cats vaccinated in "Actual Cost" public vaccination clinics			
	D. Dogs and cats licensed in "Actual Cost" public vaccination clinics			
	E. Total number of dogs and cats LICENSED in jurisdiction			
CANINE AND FELINE RABIES CONTROL	F. Dogs and cats on hand in the shelter January 1, 2009 (carried over from 2008)	0	6	
	G. Dogs and cats entering the shelter, TOTAL: (Total should equal the sum of 1 to 5 below)	174	117	
	1. Dogs and cats captured by Animal Control Officers			
	2. Dogs and cats surrendered by owners (not including those surrendered for quarantine)			
	3. Dogs and cats surrendered by the public			
	4. Dogs and cats impounded for animal bite quarantines			
	5. Dogs and cats transferred from another shelter			
	H. Disposition of dogs and cats entering shelter, TOTAL: (Total should equal the sum of 1 to 5 below)			
	1. Dogs and cats reclaimed by owner			
	2. Dogs and cats adopted by new owners			
	3. Dogs and cats euthanized			
	4. Dogs and cats that died of other causes			
	5. Dogs and cats stolen, escaped, etc.			
	6. Dogs and cats transferred to another shelter			
	I. Dead dogs and cats collected (excluding F, G and H above).			
	J. Dogs and cats on hand in the shelter December 31, 2009 (carried over to 2010)			
	ANIMAL BITE REPORTING	K. Animal bites reported, TOTAL: (Total should be the sum of 1 and 2 below)		
		1. DOG and CAT bites reported, TOTAL: (Total should be the sum of a, b, c, and d below)	18	7
a. Licensed		7	2	
b. Vaccinated only		11	0	
c. Neither licensed or vaccinated (but owned)		0	0	
d. Strays		0	5	
2. OTHER ANIMAL bites reported, TOTAL: (Total should be the sum of a and b below)				
a. Other domestics (excluding cats)				
b. Wild				

Please Complete Reverse

02/12/2010 16:30 FAX 8585714288

COUNTYVET

		NUMBER	
		Dogs	Cats
ANIMAL QUARANTINES	L. Number of 30 day quarantines for vaccinated dogs and cats exposed to potentially rabid animals	0	0
	M. Number of 6 month quarantines for unvaccinated dogs and cats exposed to potentially rabid animals	0	0
	N. Number of 6 month quarantines for domestic livestock (horses, cattle, etc.) exposed to potentially rabid animals		
	O. Number of 30 day or 6 month quarantines not completed because animals were euthanized	0	
AGENCY ADMIN	P. Number of animal control officers employed in jurisdiction		1
	Q. Name of agency or organization responsible for rabies control activities in this jurisdiction:  Address: _____ Phone: ( ) _____		

Completed by:

Endorsement by local Health Officer or  
authorized representative:Date: 2-28-10

Date: \_\_\_\_\_

Signature: [Signature]

Signature: \_\_\_\_\_

Name (print): MARK C. STAHL

Name (print): \_\_\_\_\_

Title: ANIMAL SERVICES OFFICER

Title: \_\_\_\_\_

Agency: CORONADO ANIMAL SERVICES

Agency: \_\_\_\_\_

Telephone: (619) 522-7371

Telephone: \_\_\_\_\_

Email: MSTAHL@CORONADO.CA.US

Email: \_\_\_\_\_

**AFTER ENDORSEMENT  
PLEASE FORWARD COMPLETED FORM TO:**

California Department of Public Health  
Veterinary Public Health Section  
MS 7308  
P. O. Box 997377  
Sacramento, CA 95899-7377

PHONE: (916) 552-9740  
FAX: (916) 552-9725



State of California - Health and Human Services Agency

California Department of Public Health  
Veterinary Public Health Section**STATEMENT OF ENFORCEMENT  
OF LOCAL RABIES CONTROL ACTIVITIES**  
Completed Form to be Forwarded to the Local Health Officer

This Statement of Enforcement of Rabies Control Requirements is for the Declared "Rabies Endemic Area" described below:

SAN Diego, CA  
(County)Effective 4/10/10  
(Date)Escondido, SAN MARCOS, POWAY  
Specify the Area or Jurisdiction for Which this Statement is Made

In accordance with Section 121585 and 121690 of the California Health and Safety Code, and upon the declaration of the Director of Public Health that all California counties are "Rabies Areas", the following statutory and regulatory programs must have continued enforcement in your jurisdiction:

1. The owner of every dog over four months of age shall ensure that their animal is currently vaccinated for rabies and licensed. Dogs less than four months of age must be kept at home, or supervised on leash.
2. An animal/rabies control program must be implemented on a county-wide basis to include an animal pound system, animal bite reporting, and stray animal control.
3. The county and or city shall provide or arrange for "Actual Cost" canine rabies vaccination clinics. The Department of Public Health approved "actual cost" vaccination fee in 2010 is \$6.00 per dog.
4. The county and or city shall conduct a rabies control program (rabies investigations, animal quarantines, etc.) for the purpose of carrying out and enforcing the provisions of the California rabies control laws and regulations.

**PLEASE INDICATE BY ENDORSEMENT BELOW  
AREA OR JURISDICTION COMPLIANCE WITH THE REQUIREMENTS OF  
THE CALIFORNIA RABIES CONTROL PROGRAM**Person responsible for conducting the Rabies  
Control Program in the jurisdiction or area:Date: 4/10/10Signature: [Signature]Name (print): TRACI CHAVEZTitle: DIRECTOR OF ANIMAL SERVICESAddress: 3450 E. VALLEY PKWY  
ESCONDIDO, CA 92027Telephone: 760 988 2251Endorsement by local Health Officer  
or authorized representative:Date: 4-10-10Signature: [Signature]Name (print): Kathy WarnerTitle: DIRECTOR OF OPERATIONSAddress: 3450 E Valley Parkway  
Escondido, CA 92027Telephone: 760-988-2210

Local Health Departments: Please forward the endorsed form to the Department of Public Health, Veterinary Public Health Section, MS 7308, P.O. Box 997377, Sacramento, CA 95899-7377. Telephone (916) 552-9740, Fax (916) 552-9725

## ANNUAL REPORT OF LOCAL RABIES CONTROL ACTIVITIES

For January Through December, 2009

Jurisdiction for which this report is made:

Note: If report for any item is "none" or "zero", so indicate

NUMBER

RABIES VACCINATION AND LICENSING	A.	Number of "Actual Cost" rabies public vaccination clinics held	NUMBER	
	B.	Number of animal control citations issued for rabies vaccination and licensing violations	Dogs	Cats
			0	
			97	
	C.	Dogs and cats vaccinated in "Actual Cost" public vaccination clinics	83	0
	D.	Dogs and cats licensed in "Actual Cost" public vaccination clinics	63	0
	E.	Total number of dogs and cats LICENSED in jurisdiction	8519	0
CANINE AND FELINE RABIES CONTROL	F.	Dogs and cats on hand in the shelter January 1, 2009 (carried over from 2008)	171	207
	G.	Dogs and cats entering the shelter, TOTAL: (Total should equal the sum of 1 to 5 below)	2630	2222
	1.	Dogs and cats captured by Animal Control Officers	1010	164
	2.	Dogs and cats surrendered by owners (not including those surrendered for quarantine)	59	50
	3.	Dogs and cats surrendered by the public G1 THROUGH G5	1716	1999
	4.	Dogs and cats impounded for animal bite quarantines ARE	26	9
	5.	Dogs and cats transferred from another shelter MUTUALLY EXCLUSIVE	19	0
	H.	Disposition of dogs and cats entering shelter, TOTAL: (Total should equal the sum of 1 to 6 below)	2822	2195
	1.	Dogs and cats reclaimed by owner	881	53
	2.	Dogs and cats adopted by new owners H1 THROUGH H6	967	883
	3.	Dogs and cats euthanized ARE	580	821
	4.	Dogs and cats that died of other causes MUTUALLY EXCLUSIVE	16	311
	5.	Dogs and cats stolen, escaped, etc.	0	3
	6.	Dogs and cats transferred to another shelter	378	124
	I.	Dead dogs and cats collected (excluding F, G and H above).	82	33
	J.	Dogs and cats on hand in the shelter December 31, 2009 (carried over to 2010)	172	233
ANIMAL BITE REPORTING	K.	Animal bites reported, TOTAL: (Total should be the sum of 1 and 2 below)		
			Dogs	Cats
	1.	DOG and CAT bites reported, TOTAL: (Total should be the sum of a, b, c, and d below)	139	10
	a.	Licensed	100	0
	b.	Vaccinated only	4	1
	c.	Neither licensed or vaccinated (but owned)	33	9
	d.	Strays	2	0
	2.	OTHER ANIMAL bites reported, TOTAL: (Total should be the sum of a and b below)	2	
	a.	Other domestics (excluding cats)	0	
b.	Wild	2		

Please Complete Reverse

CDPH, DCDC, VRIIS 2009

		NUMBER	
		Dogs	Cats
ANIMAL QUARANTINES	L. Number of 30 day quarantines for vaccinated dogs and cats exposed to potentially rabid animals	4	0
	M. Number of 6 month quarantines for unvaccinated dogs and cats exposed to potentially rabid animals	6	0
	N. Number of 6 month quarantines for domestic livestock (horses, cattle, etc.) exposed to potentially rabid animals	0	
	O. Number of 30 day or 6 month quarantines not completed because animals were euthanized	2	
AGENCY ADMIN	P. Number of animal control officers employed in jurisdiction	6	
	Q. Name of agency or organization responsible for rabies control activities in this jurisdiction: Address: <u>Escondido Humane Society.</u> <u>3450 E. Valley PKWY</u> Phone: <u>(760) 888-2275</u>		

Completed by:

Date: April 10, 2010Signature: Traci ChavezName (print): TRACI CHAVEZTitle: Director of Animal ServicesAgency: Escondido Humane SocietyTelephone: 760 888 2251Email: traci@escondidohumane society.orgEndorsement by local Health Officer or  
authorized representative:Date: 4-10-10Signature: Kathy WarnerName (print): Kathy WarnerTitle: Director of OperationsAgency: Escondido Humane SocietyTelephone: 760-888-2210Email: kathy.w@escondidohumane society.orgAFTER ENDORSEMENT  
PLEASE FORWARD COMPLETED FORM TO:California Department of Public Health  
Veterinary Public Health Section  
MS 7308  
P. O. Box 997377  
Sacramento, CA 95899-7377PHONE: (916) 552-9740  
FAX: (916) 552-9725

State of California - Health and Human Services Agency

California Department of Public Health  
Veterinary Public Health Section

**STATEMENT OF ENFORCEMENT  
OF LOCAL RABIES CONTROL ACTIVITIES**  
Completed Form to be Forwarded to the Local Health Officer

This Statement of Enforcement of Rabies Control Requirements is for the Declared "Rabies Endemic Area" described below:

(County) San Diego Effective (Date) 2/17/10  
La Mesa  
Specify the Area or Jurisdiction for Which this Statement is Made

In accordance with Section 121585 and 121690 of the California Health and Safety Code, and upon the declaration of the Director of Public Health that all California counties are "Rabies Areas", the following statutory and regulatory programs must have continued enforcement in your jurisdiction:

1. The owner of every dog over four months of age shall ensure that their animal is currently vaccinated for rabies and licensed. Dogs less than four months of age must be kept at home, or supervised on leash.
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**PLEASE INDICATE BY ENDORSEMENT BELOW  
AREA OR JURISDICTION COMPLIANCE WITH THE REQUIREMENTS OF  
THE CALIFORNIA RABIES CONTROL PROGRAM**

Person responsible for conducting the Rabies  
Control Program in the jurisdiction or area:

Date: 2/17/10  
Signature: C. Newmark  
Name (print): Cassie Newmark  
Title: Animal Control Officer  
Address: 8181 Allison Ave  
La Mesa CA  
Telephone: 619 667 1436

Endorsement by local Health Officer  
or authorized representative:

Date: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Name (print): \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_

Local Health Departments: Please forward the endorsed form to the Department of Public Health, Veterinary Public Health Section, MS 7308, P. O. Box 997377, Sacramento, CA 95899-7377, Telephone (916) 552-9740, Fax (916) 552-9725

# ANNUAL REPORT OF LOCAL RABIES CONTROL ACTIVITIES

## For Through , 2009

Jurisdiction for which this report is made.

CITY OF LA MESA

Note: If report for any item is none or zero, so indicate		NUMBER	
	A. Number of Actual Cost rabies public vaccination clinics held	0	
<b>RABIES</b>	B. Number of animal control citations issued for rabies vaccination and licensing violations	4	
<b>VACCINATIONS</b>		<b>Dogs</b>	<b>Cats</b>
<b>AND</b>	C. Dogs and cats vaccinated in Actual Cost public vaccination clinics	0	0
<b>LICENSING</b>	D. Dogs and cats licensed in Actual Cost public vaccination clinics	0	0
	E. Total number of dogs and cats LICENSED in jurisdiction	5431	0
	F. Dogs and cats on hand in the shelter January 1, 2000 (carried over from )	0	0
	G. Dogs and cats entering the shelter, TOTAL: (Total should equal the sum of 1 to 5 below)	283	134
	1. Dogs and cats captured by Animal Control Officers	132	35
	2. Dogs and cats surrendered by owners (not including those surrendered for quarantine)	54	38
<b>CANINE</b>	3. Dogs and cats surrendered by the public <b>G1 THROUGH G5</b>	96	61
<b>AND</b>	4. Dogs and cats impounded for animal bite quarantines <b>ARE</b>	1	0
<b>FELINE</b>	5. Dogs and cats transferred from another shelter <b>MUTUALLY EXCLUSIVE</b>	0	0
<b>RABIES</b>	H. Disposition of dogs and cats entering shelter, TOTAL: (Total should equal the sum of 1 to 6 below)	283	134
<b>CONTROL</b>	1. Dogs and cats reclaimed by owner	118	5
	2. Dogs and cats adopted by new owners <b>H1 THOUGH H6</b>	0	0
	3. Dogs and cats euthanized <b>ARE</b>	0	0
	4. Dogs and cats that died of other causes <b>MUTUALLY EXCLUSIVE</b>	0	0
	5. Dogs and cats stolen, escaped, etc.	0	0
	6. Dogs and cats transferred to another shelter	165	129
	I. Dead dogs and cats collected (excluding F, G and H above)	8	31
	J. Dogs and cats on hand in the shelter (to be carried over )	0	0
	K. Animal bites reported, TOTAL: (Total should be the sum of 1 and 2 below)	39	
		<b>Dogs</b>	<b>Cats</b>
	1. DOG and CAT bites reported, TOTAL: (Total should be the sum of a, b, c, and d, below)	34	5
<b>ANIMAL</b>	a. Licensed dogs	15	0
<b>BITE</b>	b. Vaccinated only	8	3
<b>REPORTING</b>	c. Neither licensed or vaccinated (but owned)	8	2
	d. Strays	3	0
	2. OTHER ANIMAL, bites reported, TOTAL: (Total should be the sum of a and b below)	1	
	a. Other domestics (excluding cats)	0	
	b. Wild	1	

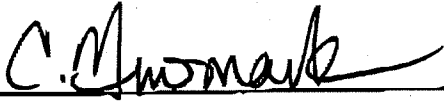
NUMBER  
Dogs Cats

	L. Number of 30 day quarantines for vaccinated dogs and cats exposed to potentially rabid animals	0	0
ANIMAL	M. Number of 6 month quarantines for unvaccinated dogs and cats exposed to potentially rabid animals	0	0
QUARANTINES	N. Number of 6 month quarantines for domestic livestock (horses, cattle, etc) exposed to potentially rabid animals.	0	
	O. Number of 30 day or 6 month quarantines not completed because animals were euthanized	0	
	P. Number of animal control officers employed in jurisdiction	1	
AGENCY ADMIN	Q. Name of agency or organization responsible for rabies control activities in this jurisdiction: <u>LA MESA ANIMAL CONTROL</u> Address: <u>8181 Allison Ave La Mesa, CA 91941</u> Phone: <u>(619) 667-1436</u>		

Completed by:

Endorsed by local Health Officer or  
authorized representative:

Signature:



Signature:

Name (print): Cassandra Newmark

Name (print):

Title: Animal Control Officer

Title:

Agency: La Mesa Animal Control

Agency:

Telephone: (619) 667-1436

Telephone:

## AFTER ENDORSEMENT

PLEASE FORWARD COMPLETED FORM TO:

S.D.C.A.D.D.L.  
Office of the County Veterinarian  
5555 OVERLAND AVENUE BLDG. #4  
SAN DIEGO, CA 92123  
(858)694-2838  
FAX: (858) 571-4268

**ANNUAL REPORT OF LOCAL RABIES CONTROL ACTIVITIES**  
For January Through December, 2009

Jurisdiction for which this report is made: City of National City

RABIES VACCINATION AND LICENSING	A. Number of "Actual Cost" rabies public vaccination clinics held	100	
	B. Number of animal control citations listed for rabies vaccinations and licensing violations.	142	
		DOG	CAT
	C. Dogs and cats vaccinated in "Actual Cost" public vaccination clinics	551	62
	D. Dogs and cats licensed in "Actual Cost" public vaccination clinics	0	0
	E. Total number of dogs and cats LICENSED in jurisdiction	1653	0
CANINE AND FELINE RABIES CONTROL	F. Dogs and cats on hand in the shelter January 1, 2009 (carried over from 2009)	137	169
		DOG	CAT
	G. Dogs and cats entering the shelter (TOTAL)	430	725
	1. Dogs and cats captured by Animal Control Officers	251	344
	2. Dogs and cats surrendered by owners (not including those surrendered for quarantine)	21	16
	3. Dogs and cats surrendered by the public (strays)	148	364
	4. Dogs and cats impounded for animal bite quarantines	10	1
	5. Dogs and cats transferred from another shelter	0	0
	H. Disposition of dogs and cats entering shelter (TOTAL)	552	755
	1. Dogs and cats reclaimed by owner	95	5
	2. Dogs and cats adopted by new owners	276	216
	3. Dogs and cats euthanized	181	515
	4. Dogs and cats that died of other reasons	0	2
	5. Dogs and cats stolen, escaped, etc.	0	17
	6. Dogs and cats transferred to another shelter	0	40
	I. Dead dogs and cats collected (excluding F, G, and H above)	30	93
	J. Dogs and cats on hand in the shelter December 31, 2009	98	78
ANIMAL BITE REPORTING	K. Animals bites reported (TOTAL should be the sum of 1 and 2 below)	114	
		DOG	CAT
	1. Dog and cat bites reported (TOTAL)	53	4
	a. Licensed	13	0
	b. Vaccinated only	15	1
	c. Neither licensed nor vaccinated (but owned)	18	1
	d. Strays	7	2
	2. Other animal bites reported (TOTAL)	0	
	a. Other domestics (excluding cats)	0	
	b. Wild	0	

# ANNUAL REPORT OF LOCAL RABIES CONTROL ACTIVITIES

For January Through December, 2009

Jurisdiction for which this report is made: City of National City

		Dogs	Cats
ANIMAL QUARANTINE	L. Number of 30 day quarantines for vaccinated dogs and cats exposed to potentially rabid animals	0	0
	M. Number of 6 month quarantine for unvaccinated dogs and cats exposed to potentially rabid animals	0	0
	N. Number of 6 month quarantines for domestic livestock (horses, cattle, etc.) exposed to potentially rabid animals	0	
	O. Number of 30 day or 6 month quarantines not completed because animals were euthanized	0	
AGENCY ADMIN	P. Number of animal control officers employed in jurisdiction	1	
	Q. Name of agency or organization responsible for rabies control activities in this jurisdiction: City of National City		
	Address: 1200 National City Blvd, National City CA. 91960 Phone: (619) 336-4478		

Completed by:

Endorsement by local Health Officer or  
Authorized representative:

Signature: Jane Gordon  
 Name (print): Jane Gordon  
 Title: Animal Regulations Officer  
 Agency: City of National City  
 Telephone: (619) 336-4478  
 Email: \_\_\_\_\_

Signature: Robert Brown  
 Name (print): ROBERT BROWN  
 Title: SERGEANT  
 Agency: City of National City  
 Telephone: (619) 336-4411  
 Email: \_\_\_\_\_

AFTER ENDORSEMENT  
PLEASE FORWARD COMPLETED FOR TO

California Department of Health Services  
 Veterinary Public Health Section  
 MS 7308  
 P.O. Box 997413  
 Sacramento, CA 95899-7413

PHONE: (916) 552-9740  
 FAX: (916) 552-9725



**STATEMENT OF ENFORCEMENT  
OF LOCAL RABIES CONTROL ACTIVITIES**  
Completed Form to be Forwarded to the Local Health Officer

This Statement of Enforcement of Rabies Control Requirements is for the Declared "Rabies Endemic Area" described below:

San Diego County  
(County)

Effective 3/1/10  
(Date)

Oceanside & Vista

Specify the Area or Jurisdiction for Which this Statement is Made

In accordance with Section 121585 and 121690 of the California Health and Safety Code, and upon the declaration of the Director of Public Health that all California counties are "Rabies Areas", the following statutory and regulatory programs must have continued enforcement in your jurisdiction:

1. The owner of every dog over four months of age shall ensure that their animal is currently vaccinated for rabies and licensed. Dogs less than four months of age must be kept at home, or supervised on leash.
2. An animal/rabies control program must be implemented on a county-wide basis to include an animal pound system, animal bite reporting, and stray animal control.
3. The county and or city shall provide or arrange for "Actual Cost" canine rabies vaccination clinics. The Department of Public Health approved "actual cost" vaccination fee in 2010 is \$6.00 per dog.
4. The county and or city shall conduct a rabies control program (rabies investigations, animal quarantines, etc.) for the purpose of carrying out and enforcing the provisions of the California rabies control laws and regulations.

**PLEASE INDICATE BY ENDORSEMENT BELOW  
AREA OR JURISDICTION COMPLIANCE WITH THE REQUIREMENTS OF  
THE CALIFORNIA RABIES CONTROL PROGRAM**

Person responsible for conducting the Rabies  
Control Program in the jurisdiction or area:

Date: 3-29-10

Signature: [Signature]

Name (print): Rene Harris

Title: Sr. V.P. of Animal Services

Address: 5500 Camino Street  
San Diego CA 92110

Telephone: 619 299 7012 ext 2238

Endorsement by local Health Officer  
or authorized representative:

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Name (print): \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Local Health Departments: Please forward the endorsed form to the Department of Public Health, Veterinary Public Health Section, MS 7308, P. O. Box 997377, Sacramento, CA 95899-7377, Telephone (916) 552-9740, Fax (916) 552-9725

# ANNUAL REPORT OF LOCAL RABIES CONTROL ACTIVITIES

For January Through December, 2009

Jurisdiction for which this report is made:

Oceanside and Vista

Note: If report for any item is "none" or "zero", so indicate

		NUMBER	
RABIES VACCINATION AND LICENSING	A. Number of "Actual Cost" rabies public vaccination clinics held	12	
	B. Number of animal control citations issued for rabies vaccination and licensing violations	349	
		Dogs	Cats
	C. Dogs and cats vaccinated in "Actual Cost" public vaccination clinics	1058	76
	D. Dogs and cats licensed in "Actual Cost" public vaccination clinics	1026	0
CANINE AND FELINE RABIES CONTROL	E. Total number of dogs and cats LICENSED in jurisdiction	20507	0
	F. Dogs and cats on hand in the shelter January 1, 2009 (carried over from 2008)	105	106
	G. Dogs and cats entering the shelter, TOTAL: (Total should equal the sum of 1 to 5 below)	2859	2188
	1. Dogs and cats captured by Animal Control Officers	1057	198
	2. Dogs and cats surrendered by owners (not including those surrendered for quarantine)	290	264
	3. Dogs and cats surrendered by the public G1 THROUGH G5	1268	1679
	4. Dogs and cats impounded for animal bite quarantines ARE	244	309
	5. Dogs and cats transferred from another shelter MUTUALLY EXCLUSIVE	0	8
	H. Disposition of dogs and cats entering shelter, TOTAL: (Total should equal the sum of 1 to 6 below)	3535	2238
	1. Dogs and cats reclaimed by owner	1654	1016
	2. Dogs and cats adopted by new owners H1 THROUGH H6	1133	1020
	3. Dogs and cats euthanized ARE	371	818
	4. Dogs and cats that died of other causes MUTUALLY EXCLUSIVE	30	666
	5. Dogs and cats stolen, escaped, etc.	5	0
	6. Dogs and cats transferred to another shelter	342	228
	I. Dead dogs and cats collected (excluding F, G and H above).	188	190
	J. Dogs and cats on hand in the shelter December 31, 2009 (carried over to 2010)	135	95
ANIMAL BITE REPORTING	K. Animal bites reported, TOTAL: (Total should be the sum of 1 and 2 below)		
		Dogs	Cats
	1. DOG and CAT bites reported, TOTAL: (Total should be the sum of a, b, c, and d below)	244	39
	a. Licensed	63	30
	b. Vaccinated only	21	0
	c. Neither licensed or vaccinated (but owned)	134	12
	d. Strays	26	27
	2. OTHER ANIMAL bites reported, TOTAL: (Total should be the sum of a and b below)	3	
	a. Other domestics (excluding cats)	2	
	b. Wild	1	

Please Complete Reverse

		NUMBER	
		Dogs	Cats
ANIMAL QUARANTINES	L. Number of 30 day quarantines for vaccinated dogs and cats exposed to potentially rabid animals	0	0
	M. Number of 6 month quarantines for unvaccinated dogs and cats exposed to potentially rabid animals	1	1
	N. Number of 6 month quarantines for domestic livestock (horses, cattle, etc.) exposed to potentially rabid animals	0	
	O. Number of 30 day or 6 month quarantines not completed because animals were euthanized	0	
AGENCY ADMIN	P. Number of animal control officers employed in jurisdiction	5	
	Q. Name of agency or organization responsible for rabies control activities in this jurisdiction: <u>San Diego Humane Society and SPCA, North Campus</u> Address: <u>2905 San Luis Rey Rd., Oceanside, CA</u> Phone: <u>760 757 4357</u> <u>92058</u>		

Completed by:

Date: 3/1/10

Signature: MW

Name (print): Melissa Webber

Title: Director of Operations

Agency: San Diego Humane Society, North

Telephone: 760/757-4357 ext 1223 Campus

Email: mwebber@nchumane.org

Endorsement by local Health Officer or  
authorized representative:

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Name (print): \_\_\_\_\_

Title: \_\_\_\_\_

Agency: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

AFTER ENDORSEMENT  
PLEASE FORWARD COMPLETED FORM TO:

California Department of Public Health  
Veterinary Public Health Section  
MS 7308  
P. O. Box 997377  
Sacramento, CA 95899-7377

PHONE: (916) 552-9740  
FAX: (916) 552-9725