



## Sangamon County Department of Public Health

### Sangamon County Animal Control & Adoption Center Transfer Partner Protocol and Agreement

Pursuant to the Illinois Animal Control Act and the Illinois Animal Welfare Act, provided in part below, the Sangamon County Animal Control (SCACC) requires each transfer partner to provide an Illinois Department of Agriculture (IDoA) license for transfer partners within the State of Illinois, or proof of not-for-profit status for out-of-state transfer partners. To ensure the SCACC is partnering with organizations as required by state law, the following process for transferring animals must be strictly followed.

The President or Director of the transfer partner must provide the SCACC with the names of those individuals authorized by the transfer partner to enter into contract to transfer an animal (Authorizing Agent) and the names of those individuals the transfer partner authorizes to take possession of and remove an animal from the SCACC premises on behalf of the transport partner (Transport Agent). *Authorized agents may perform one or both duties.* The transfer partner shall limit the list of agents to 3 of each. Only those designated by the transfer partner's President or Director, as Authorizing Agents and Transport Agents, may act on the transfer partner's behalf. The SCACC will require identification and authorization through the agent's photo ID.

In cases where the SCACC has requested a transfer partner to take a specific animal, the SCACC will not require the transfer partner to provide reasonable expenses incurred for animal's care from the SCACC. However, when the transfer partner has requested the transfer of a specific animal, the transfer partner will be required to reimburse the SCACC for any expenses incurred by the SCACC for the animal's care.

Once a transfer partner has indicated it wishes to take an animal, the SCACC will hold the animal for a transfer partner for five business days from the date the transfer partner provided their notice to take the animal. An animal not taken by the partner after five business days may be available for adoption through the SCACC, transferred to another transfer partner, or subject to euthanasia. Animals available for adoption may be viewed at [scdph.org](http://scdph.org) or at the SCACC facility, located at 2100 Shale Street, Springfield, IL 62703.

To initiate the transfer process, the transfer partner's Authorizing Agent must contact the SCACC at 217/535-3065. Arrangements made through unauthorized third parties will not be honored. The SCACC reserves the right to deny a transfer or terminate this agreement for any reason, including but not limited to: unethical behavior; unprofessional conduct; negative or disrespectful conduct; suspension or revocation of licensure; or any violations of Federal, State or local law.

[www.scdph.org](http://www.scdph.org)

Main Campus: 2833 South Grand Avenue East | Springfield, IL 62703-2175 | (217) 535-3100

Animal Control & Adoption Center: 2100 Shale Street | Springfield, IL 62703-5634 | (217) 535-3065



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All parties agree to follow the Illinois Animal Control Act and the Illinois Animal Welfare Act, including, but not limited to, the provisions below.

**510 ILCS 5/11 of the Illinois Animal Control Act** provides, in part, that: “No animal shelter or animal control facility shall release dogs or cats to an individual representing a rescue group, unless the group has been licensed by the Illinois Department of Agriculture or is a representative of a not-for-profit out-of-state organization, animal shelter or animal control facility. The Department may suspend or revoke the license of any animal shelter or animal control facility that fails to comply with the requirements set forth in this Section....”

**225 ILCS 605/3.4 of the Illinois Animal Welfare Act** provides in part, an animal shelter or animal control facility may not release any animal to an individual representing an animal shelter, unless (1) the recipient animal shelter has been licensed or has a foster care permit issued by the Department or (2) the individual is a representative of a not-for-profit, out-of-State organization who is transferring the animal out of the State of Illinois.

**225 ILCS 605/10 of the Illinois Animal Welfare Act** provides, in part, that: “If the Department revokes a license under this Act at an administrative hearing, the licensee and any individuals associated with that license shall be prohibited from applying for or obtaining a license under this Act for a minimum of 3 years.”

Transfer Partners shall not express themselves as private citizens or organizations on social media sites to the degree that such communication impairs working relationships of the SCACC for which loyalty and confidentiality are important, impedes the performance of their duties, impairs discipline and harmony among other transfer partners, volunteers, SCACC employees, and visitors, or negatively effects the public perception of the SCACC. Transfer Partners shall not post, transmit, or otherwise disseminate any information to which they have access as a result of their position as a transfer partner from the SCACC without permission from the SCACC Director of Operations, or his/her designee.



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### Organization President/Director,

The President or Director of the transfer partner shall complete the section below and return this form and a copy of the transfer partner's IDoA license or not-for-profit documentation, whichever is applicable, to the SCACC through the United States Postal Service, via fax, or by e-mail. Prior to sending an e-mail, the transfer partner shall call (217) 535-3065 to e-mail a PDF version of the documents to the SCACC. This agreement will expire annually, on June 30<sup>th</sup>, following submission to the SCACC. The transfer partner shall notify the SCACC immediately if their IDOA license is suspended or revoked, the not-for-profit status changes, or the transfer partner ceases to operate. By signing this agreement, the transfer partner admits and affirms it has read and agrees to follow the provisions and requirements, above, as set forth by the Sangamon County Animal Control Center.

_____ Name of Organization	_____ City/State
_____ Name & Title <i>(please print)</i>	_____ Signature
_____ Phone	_____ E-mail Address
_____ Alternate Phone	_____ Fax
_____ Initial	_____ Date
_____ Renewal	



## Sangamon County Department of Public Health

Authorizing Agent Name

Phone Number(s)

Street Address

_____	_____	_____
_____	_____	_____
_____	_____	_____

Transport Agent Name

Phone Number(s)

Street Address

_____	_____	_____
_____	_____	_____
_____	_____	_____

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