

Review/Submit

**Return to Field Targeted TNR Pilot Program**

Please review your grant application to ensure everything is correct. If you need to make any changes, click on the "Back to Record" button on the right. If you want to print a copy, click on the "Print" button. When you are ready to submit this to Maddie's Fund, click on the "Submit" button. You will not be allowed to make any changes after that.

Once you submit your grant application, you will receive an automated email from Maddie's Fund confirming your application has been submitted. If you do not receive this email, please contact the Maddie's Fund Grants Team at 925.310.5450 or [grants@maddiesfund.org](mailto:grants@maddiesfund.org) as your application may not have been submitted.

If you do not submit your application, it will remain in "In Progress" status, and **will not be reviewed by Maddie's Fund.**

**Project Information**

|                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Please provide a project title for this application:                                                                                                                                                                                                                                                                                                                                                               | Return to Field Targeted TNR Pilot Program                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| How much funding are you requesting to implement this lifesaving program (not to exceed \$5,000)?                                                                                                                                                                                                                                                                                                                  | \$5,000.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| Approximately how many additional lives will be saved as a result of this lifesaving program? (Please enter only a numerical value in the space below. If you are unsure of the exact number, give us your best estimate. If you need assistance in calculating this number, please contact the Maddie's Fund Grants Team at 925.310.5450 or <a href="mailto:grants@maddiesfund.org">grants@maddiesfund.org</a> .) | 100                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Lifesaving program you're applying to implement (you must select one of the below categories or your application will not be accepted):                                                                                                                                                                                                                                                                            | Return to Field                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| What are you trying to achieve and in what timeframe?                                                                                                                                                                                                                                                                                                                                                              | In June, 2018 the Fort Bend County Commissioner's Court amended language to an ordinance which would allow for ear-tipped cats to be exempt from our leash law. Prior to that change, all feral/community cats were euthanized on intake. After the change, we began a pilot program in two areas of the county to introduce and educate those two communities on the benefit of a TNR feral/community cat program. Our goal is to expand the pilot program to in specific areas of Fort Bend County where data has shown there is the greatest need for the program. We would like to prove the viability of the program over a one to two year period and present the data to our Commissioners Court and request to make TNR a permanent service to the citizens of Fort Bend County. Because this is a pilot program, no funding is being provided by the County at this time so we need to rely on grant awards to implement the program and then prove through data that it is a viable program for the cats and the community. For the purposes of this request, we plan on 100 spay/neuter surgeries (including ear tipping and rabies vaccine) at our contract vet at an average cost of \$50 per cat/kitten. |
| How will you measure or evaluate your success?                                                                                                                                                                                                                                                                                                                                                                     | Our plan is to measure and evaluate through data collection utilizing our Chameleon software. We will track the number of cats/kittens brought in from the pilot area(s) for 2017, 2018 and 2019, the number and cost of surgeries performed through our contract vets and the number of complaint calls received. In reality though, our success was measured with the very first cat that was spayed/neutered for the pilot program in June 2018.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Have you, or anyone in your organization, attended or been accepted to a Maddie's® Apprenticeship Program?                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |

If yes, which Maddie's® Apprenticeship Program(s) have you attended or been accepted to?

Did you, or anyone in your organization, attend the National Animal Care & Control Association's Training Conference in Denver, CO (October 11 - 12, 2018)? ☐

### Head Of Organization

Please provide us with the contact information for the head of your organization. First, click on the "Search/Add Members" button to search for the head of your organization in our database. If that person's name is in the drop-down menu, select their name and title and click "Save". If you are the head of your organization, select your name in the drop-down menu.

If you do not see their name in the drop-down menu, click on "Cancel", and then click "Invite New Members" to send them an invitation to register. Please let this person know that they will receive an email from Maddie's Fund inviting them to register for our Grants Portal.

If you are collaborating on this application with other members in your organization who are not the head of your organization, you can add them to this application using the instructions above.

| Name          | Title                    |
|---------------|--------------------------|
| Barbara Vass  | Applicant; Business User |
| Robert Hebert | Head of Organization     |

### Pending Invited Team Members

| First Name | Last Name | Email                                | Status  | Role                 |
|------------|-----------|--------------------------------------|---------|----------------------|
| Rene       | Vasquez   | rene.vasquez@fortbendcountytexas.gov | Pending | Collaborator         |
| Robert     | Hebert    | county.judge@fortbendcountytexas.gov | Pending | Head of Organization |

### Payment Contact

|                |                                                                                                |
|----------------|------------------------------------------------------------------------------------------------|
| First Name:    | Maria                                                                                          |
| Last Name:     | Segura                                                                                         |
| Title:         | County Treasurer                                                                               |
| Email Address: | <a href="mailto:maria.segura@fortbendcountytexas.gov">maria.segura@fortbendcountytexas.gov</a> |
| Phone Number:  | (281) 238-2296                                                                                 |

### Organization Information

Please review your organization's information and make any necessary changes. If any information on this tab is missing, your application will be considered incomplete. Be sure to read through the Maddie's Fund Grant Requirements (<http://www.maddiesfund.org/grant-requirements.htm>) before completing this tab.

|                                              |                                                                                                                                                                   |
|----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Legal Name</b>                            | Fort Bend County                                                                                                                                                  |
| <b>Organization Name</b>                     | Fort Bend County Animal Services                                                                                                                                  |
| <b>AKA</b>                                   |                                                                                                                                                                   |
| <b>EIN</b>                                   | 74-6001969                                                                                                                                                        |
| <b>Organization Phone</b>                    | (281) 342-1512                                                                                                                                                    |
| <b>Ext</b>                                   |                                                                                                                                                                   |
| <b>Billing Street</b>                        | 301 Jackson Street<br>Attn: Animal Services                                                                                                                       |
| <b>Billing City</b>                          | Richmond                                                                                                                                                          |
| <b>Billing State/Province</b>                | TX                                                                                                                                                                |
| <b>Billing Zip/Postal Code</b>               | 77469                                                                                                                                                             |
| <b>U.S. County</b>                           | Fort Bend                                                                                                                                                         |
| <b>Website</b>                               | <a href="http://www.fortbendcountytexas.gov">http://www.fortbendcountytexas.gov</a>                                                                               |
| <b>Annual Animal Statistics Link</b>         | <a href="https://www.fortbendcountytexas.gov/government/department/animal-services">https://www.fortbendcountytexas.gov/government/department/animal-services</a> |
| <b>Lifesaving Percentage Link</b>            | <a href="https://www.fortbendcountytexas.gov/government/department/animal-services">https://www.fortbendcountytexas.gov/government/department/animal-services</a> |
| <b>Shelter Animals Count</b>                 | Yes                                                                                                                                                               |
| <b>Million Cat Challenge</b>                 | Yes                                                                                                                                                               |
| <b>If no Shelter Animals Count, explain.</b> |                                                                                                                                                                   |
| <b>If no Million Cat Challenge, explain.</b> |                                                                                                                                                                   |
| <b>Cats</b>                                  | 1,000 to 4,999                                                                                                                                                    |
| <b>Organization Type</b>                     | Government Animal Services                                                                                                                                        |
| <b>Dogs</b>                                  | 1,000 to 4,999                                                                                                                                                    |
| <b>If Other org. type, please explain.</b>   |                                                                                                                                                                   |

### Submitted By

Please review your information and make any changes if needed.

**Salutation**

**First Name** Barbara

Middle Name

Last Name

Vass

Suffix

Title

Community Involvement Coordinator

Business Phone

(281) 342-1512

Extension

Home Phone

Other Phone

Email

[barbara.vass@fortbendcountytexas.gov](mailto:barbara.vass@fortbendcountytexas.gov)

Mobile Phone

(832) 317-7682

Alternate Email

### Submission Agreement

My organization is current on all grant reporting requirements for any previous Maddie's Fund grants or has never received a grant from Maddie's Fund. (Please contact Maddie's Fund at 925.310.5450 or [grants@maddiesfund.org](mailto:grants@maddiesfund.org) if you have any questions about this.)

Not Applicable (we've never received a grant from Maddie's Fund)

If no, please explain:

By selecting "Yes", I agree to the above statements. I certify that I have answered all of the questions on every tab of this application (Project Information, Head of Organization, Payment Contact, Organization Information and Submitted By). All the information is complete and correct to the best of my knowledge. I am aware that incomplete applications might not be reviewed by the Maddie's Fund Grants Team.

✓