

# LOCAL RABIES CONTROL AUTHORITY (LRCA)

The \_\_\_\_\_ of \_\_\_\_\_  
(governing body) (city or county)

designates \_\_\_\_\_ as the Local Rabies Control  
(job title or name)

Authority (LRCA) for the purposes of the RABIES CONTROL ACT OF 1981.

This appointment became effective \_\_\_\_\_.  
(date)

AUTHORIZING PERSON'S NAME (print): \_\_\_\_\_

AUTHORIZING PERSON'S TITLE (Mayor/County Judge): \_\_\_\_\_

AUTHORIZING PERSON'S SIGNATURE: \_\_\_\_\_

Please print the name and contact information of the appointed individual:

NAME: \_\_\_\_\_

AGENCY: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

FAX: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

Send a copy of this form to:  
Texas DSHS - Region 8 Zoonosis Control  
7430 Louis Pasteur Drive  
San Antonio, TX 78229  
Fax: (210) 692-1457  
E-Mail: [Region8.Zoonosis@dshs.texas.gov](mailto:Region8.Zoonosis@dshs.texas.gov)