City of San Antonio

July 14, 2026
Due Date August 19, 2026

REQUEST FOR APPLICATION
SPAY/NEUTER CONTRACT VETERINARIANS

To All Interested Parties:

The City of San Antonio is soliciting applications from qualified and experienced respondents for Spay/Neuter Contract Veterinarians at Animal Care Services.

I BACKGROUND

The City of San Antonio Animal Care Services (ACS) is the largest open-admission animal shelter in South Texas. Serving San Antonio residents, the department's mission is to encourage responsible pet ownership by promoting and protecting the health, safety, and welfare of the residents and pets of San Antonio through education, enforcement, and community partnership.

In 2023, ACS developed a new Strategic Plan with five focus areas: (1) Safe communities; (2) Humane treatment of pets; (3) Placement of pets for life; (4) Positive community connections; and (5) Thriving and healthy workforce. A critical component in achieving the goals of the Strategic Plan is reducing the number of unwanted pets through spay-and-neuter programs and offering affordable, accessible veterinary care.

The City seeks partners to provide veterinary services at ACS Facilities. These services will include routine sterilization surgeries for pets of City of San Antonio residents and ACS pets, as well as non-routine sterilization surgeries, such as cryptorchid, pyometra, in-heat, gravid, and hernias. Additionally, veterinary partners will provide wellness services, such as pet examinations, vaccinations, microchipping, and minor medical care related to the surgery. Additionally, these services may include working at other ACS Facilities and may have modified duties based on the operational needs of the facility as determined by ACS Clinic Management.

II SCOPE OF SERVICE

1. Spay/Neuter Surgeries. When scheduled, Contractor shall perform specific duties and responsibilities for spay and neuter surgeries, which shall include:
    a. Establishing a Veterinarian-Client-Patient Relationship (VCPR) with each patient.
    b. Performing on each pet a physical "hands-on" exam, to include thoracic auscultation, and examination of all visible systems to determine suitability for sterilization procedure.
    c. Evaluating each animal for signs of illness or anesthetic risk, to include upper respiratory infections, severe parasite burden, or other. The veterinarian will be responsible for communicating if the pet is not a suitable surgical candidate and creating a plan for the resident to seek out the resources needed for their pet.
    d. Performing a minimum of 10 spay/neuter surgeries per shift, with the expectation of building up to at least 20 or more. A typical shift is an eight-hour shift, or as determined by operational needs and/or considerations related to same-day surgical complications. More than one contractor may be scheduled for the same shift to meet a minimum total of 20 surgeries or more per day per clinic.
    e. Demonstrating the ability and experience to handle own intra-operative complications, including but not limited to pedicle hemorrhage, splenic trauma, urinary bladder trauma, discovery of diaphragmatic hernias, etc.
    f. Providing intra-operative communication with owners/caregivers by phone for life-saving measures or decision-making.
    g. Providing post-operative care, including rechecking surgical sites and handling own surgical complications that may have developed on the same day of surgery, to include same day return to surgery if needed. Additional post-operative care includes prescribing medications, entering medical notes/prescriptions, talking to owners/caregivers as needed about anesthetic/surgical updates or other, and monitoring of patients until all animals are fully awake/recovered from anesthesia.
    h. Providing follow-up care due to surgical complications, including complications from surgeries performed during previous shifts and by other clinic surgeons. This includes physical examination, talking with owners/caregivers, prescribing medications, and providing a recheck/monitoring plan.
    i. Maintaining a complication rate of less than 1%.
    j. Providing direct vet communication with pet owners/caregivers about medical findings/needs or medical/anesthetic/surgical complications. This includes discussing nonroutine surgical findings, medical findings or medical care needed, anesthetic complications, CPR, and death.
    k. Maintaining updated and accurate animal medical records.
    l. Maintaining high standards of care and quality control provided in a productive and courteous manner.
    m. Abiding by Department requirements for licensing and credentialing.
    n. Adhering to and abiding by Department policies regarding access, maintenance, dispensation, and tracking of controlled substances.
    o. Transferring, at the City's request, controlled substances procured by the City under the custody and control of the Contractor to the City without unreasonable delay.
    p. Invoicing the City for work performed on a monthly basis.

2. Veterinary Medicine Duties. When scheduled, Contractor shall perform specific duties and responsibilities for veterinary medicine services, which may include:

a. Establishing a Veterinarian-Client-Patient Relationship (VCPR) with each patient.
b. Performing medical examinations and prescribing treatments to animals during wellness hours.
c. Partaking in large-scale vaccination and/or microchipping events scheduled at either clinic.
d. Performing emergency surgeries and administering emergency medication.
e. Performing special surgeries and administering medication
f. Prescribing and administering euthanasia for sick or injured animals.
g. Overseeing parasite treatment including appropriate deworming, checking animals for heartworms, administering preventatives, and basic in-house diagnostics.
h. Providing vaccinations to animals at the facility.
i. Providing diagnosis and treatment of animals in accordance with Department protocols and standards.
j. Maintaining updated and accurate animal medical records.
k. Maintaining high standards of care and quality control provided in a productive and courteous manner.
l. Answering questions from the public pertaining to their pet's medical case including but not limited to, diagnosis, treatment plan, etc.
m. Abiding by Department requirements for licensing and credentialing.
n. Adhering to and abiding by Department policies regarding access, maintenance, dispensation, and tracking of controlled substances.
o. Performing other veterinary duties as designated by City.

III COMPENSATION

Contractor shall be paid at a rate of ONE THOUSAND THREE HUNDRED DOLLARS ($1,300.00) per shift. Contractor shall also be paid a FIFTY DOLLAR ($50.00) per shift travel stipend if residing outside the City of San Antonio limits AND more than 25 miles away from the clinic.

Abiding by Department requirements for licensing and credentialing, including obtaining the appropriate Diversion Control Division (DEA) license. Contractor may be reimbursed up to $1000.00 per DEA license per location.

IV INSURANCE REQUIREMENTS

No later than 30 days before the scheduled service under this contract, CONTRACTOR must provide a completed Certificate(s) of Insurance to CITY's XXX Department. The certificate must be:

- clearly labeled with the legal name of the contract in the Description of Operations block;
- completed by an agent and signed by a person authorized by the insurer to bind coverage on its behalf (CITY will not accept Memorandum of Insurance or Binders as proof of insurance);.
- properly endorsed and have the agent's signature, and phone number,

Certificates may be mailed or sent via email, directly from the insurer's authorized representative. CITY shall have no duty to pay or perform under this Agreement until such certificate and endorsements have been received and approved by CITY'S XXXX Department. No officer or employee, other than CITY'S Risk Manager, shall have authority to waive this requirement.

If the City does not receive copies of insurance endorsement, then by executing this Agreement, CONTRACTOR certifies and represents that its endorsements do not materially alter or diminish the insurance coverage for the Event.

The City's Risk Manager reserves the right to modify the insurance coverages, their limits, and deductibles prior to the scheduled event or during the effective period of this Agreement based on changes in statutory law, court decisions, and changes in the insurance market which presents an increased risk exposure.

CONTRACTOR shall obtain and maintain in full force and effect for the duration of this Agreement, at CONTRACTOR'S sole expense, insurance coverage written on an occurrence basis, by companies authorized and admitted to do business in the State of Texas and with an A.M. Best's rating of no less than A- (VII), in the following types and for an amount not less than the amount listed below. If the CONTRACTOR claims to be self-insured, they must provide a copy of their declaration page so the CITY can review their deductibles:

INSURANCE TYPE	***LIMITS***
1. Professional Liability	$1,000,000 per claim damages by reason of any act, malpractice, error, or omission in the professional service.

CONTRACTOR must require, by written contract, that all subcontractors providing goods or services under this Agreement obtain the same insurance coverages required of CONTRACTOR and provide a certificate of insurance and endorsement that names CONTRACTOR and CITY as additional insureds. CONTRACTOR shall provide CITY with subcontractor certificates and endorsements before the subcontractor starts work.

If a loss results in litigation, then the CITY is entitled, upon request and without expense to the City, to receive copies of the policies, declaration page and all endorsements. CONTRACTOR must comply with such requests within 10 days by submitting the requested insurance documents to the CITY at the following address:

City of San Antonio
Animal Care Services Department
4710 State Hwy 151
San Antonio, TX 78227

CONTRACTOR's insurance policies must contain or be endorsed to contain the following provisions:

- Name CITY and its officers, officials, employees, volunteers, and elected representatives as additional insureds by endorsement, as respects operations and activities of, or on behalf of, the named insured performed under contract with CITY. The endorsement requirement is not applicable for workers' compensation and professional liability policies.

- Endorsement that the "other insurance" clause shall not apply to CITY where CITY is an additional insured shown on the policy. CITY's insurance is not applicable in the event of a claim.

- Contractor shall submit a waiver of subrogation to include, workers' compensation, employers' liability, general liability and auto liability policies in favor of CITY; and

- Provide 30 days advance written notice directly to CITY of any suspension, cancellation, non-renewal or materials change in coverage, and not less than ten (10) calendar days advance written notice for nonpayment of premium.

Within five (5) calendar days of a suspension, cancellation, material change in coverage, or non-renewal of coverage, CONTRACTOR shall provide a replacement Certificate of Insurance and applicable endorsements to CITY. CITY shall have the option to suspend CONTRACTOR'S performance should there be a lapse in coverage at any time during this Agreement. Failure to provide and to maintain the required insurance shall constitute a material breach of this Agreement.

In addition to any other remedies CITY may have upon CONTRACTOR'S failure to provide and maintain any insurance or policy endorsements to the extent and within the time required, CITY may order CONTRACTOR to stop work and/or withhold any payment(s) which become due to CONTRACTOR under this Agreement until CONTRACTOR demonstrates compliance with requirements.

Nothing contained in this Agreement shall be construed as limiting the extent to which CONTRACTOR may be held responsible for payments of damages to persons or property resulting from CONTRACTOR'S or its subcontractors' performance of the work covered under this Agreement.

CONTRACTOR'S insurance shall be deemed primary and non-contributory with respect to any insurance or self - insurance carried by City for liability arising out of operations under this Agreement.

The insurance required is in addition to and separate from any other obligation contained in this Agreement and no claim or action by or on behalf of City shall be limited to insurance coverage provided.

CONTRACTOR and any subcontractor are responsible for all damage to their own equipment and/or property result from their own negligence.

V INDEMNIFICATION REQUIREMENTS

If selected, Contractor will be required to comply with the indemnification provisions shown below:

CONTRACTOR covenants and agrees to FULLY INDEMNIFY, DEFEND and HOLD HARMLESS, the CITY and the elected officials, employees, officers, directors, volunteers and representatives of the CITY, individually and collectively, from and against any and all costs, claims, liens, damages, losses, expenses, fees, fines, penalties, proceedings, actions, demands, causes of action, liability and suits of any kind and nature, including but not limited to, personal or bodily injury, death and property damage, made upon the CITY directly or indirectly arising out of, resulting from or related to CONTRACTOR'S activities under this Agreement, including any acts or omissions of CONTRACTOR, any agent, officer, director, representative, employee, consultant or subcontractor of CONTRACTOR, and their respective officers, agents employees, directors and representatives while in the exercise of the rights or performance of the duties under this Agreement. The indemnity provided for in this paragraph shall not apply to any liability resulting from the negligence of CITY, its officers or employees, in instances where such negligence causes personal injury, death, or property damage. IN THE EVENT CONTRACTOR AND CITY ARE FOUND JOINTLY LIABLE BY A COURT OF COMPETENT JURISDICTION, LIABILITY SHALL BE APPORTIONED COMPARATIVELY IN ACCORDANCE WITH THE LAWS FOR THE STATE OF TEXAS, WITHOUT, HOWEVER, WAIVING ANY GOVERNMENTAL IMMUNITY AVAILABLE TO THE
CITY UNDER TEXAS LAW AND WITHOUT WAIVING ANY DEFENSES OF THE PARTIES UNDER TEXAS LAW.

The provisions of this INDEMNITY are solely for the benefit of the parties hereto and not intended to create or grant any rights, contractual or otherwise, to any other person or entity. CONTRACTOR shall advise the CITY in writing within 24 hours of any claim or demand against the CITY or CONTRACTOR known to CONTRACTOR related to or arising out of CONTRACTOR'S activities under this AGREEMENT and shall see to the investigation and defense of such claim or demand at CONTRACTOR's cost. The CITY shall have the right, at its option and at its own expense, to participate in such defense without relieving CONTRACTOR of any of its obligations under this paragraph.

Defense Counsel - CITY shall have the right to select or to approve defense counsel to be retained by CONTRACTOR in fulfilling its obligation hereunder to defend and indemnify CITY, unless such right is expressly waived by CITY in writing. CONTRACTOR shall retain CITY approved defense counsel within seven (7) business days of CITY'S written notice that CITY is invoking its right to indemnification under this Contract. If CONTRACTOR fails to retain Counsel within such time period, CITY shall have the right to retain defense counsel on its own behalf, and CONTRACTOR shall be liable for all costs incurred by CITY. CITY shall also have the right, at its option, to be represented by advisory counsel of its own selection and at its own expense, without waiving the foregoing.

Employee Litigation - In any and all claims against any party indemnified hereunder by any employee of CONTRACTOR, any subcontractor, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable, the indemnification obligation herein provided shall not be limited in any way by any limitation on the amount or type of damages, compensation or benefits payable by or for CONTRACTOR or any subcontractor under worker's compensation or other employee benefit acts.

VI APPLICATION REQUIREMENTS

If interested in providing these services to the City, please submit the following information:

- Attachment A – General Information Form, References, and Resume & Licenses
- Attachment B – Contracts Disclosure
- Attachment C – Litigation Disclosure
- Attachment D – Signature Page

Contractor must register with the City and receive their SAePS number before submitting this application. Registration is available through the following link: https://www.sa.gov/Directory/Departments/Finance/About/Divisions/Procurement/Become-a-Vendor.

Contractor shall submit these items in electronic form (signed and scanned) to the ACS Contract Coordinator at Nichellie.James2@sanantonio.gov or signed and mailed to:

City of San Antonio Animal Care Services Department
Attn: Nichellie James
4710 State Highway 151
San Antonio, TX 78227

CITY OF SAN ANTONIO
ANIMAL CARE SERVICES
DEPARTMENT

ATTACHMENT A

GENERAL INFORMATION FORM

CITY OF SAN ANTONIO
ANIMAL CARE SERVICES
DEPARTMENT

1. **Contractor Information:** Provide the following information regarding the Contractor.

   Contractor Name:_____

   (NOTE: Give exact legal name as it will appear on the contract, if awarded.)

   Address:_____

   City: _____ State: _____Zip Code: _____

   Telephone: _____Email:_____

   Provide any other names under which Contractor has operated within the last 10 years and length of time under for each:

   _____

   _____

   _____

2. Is Contractor licensed to practice veterinary medicine in Texas?

   Yes ___ No ___ If "Yes", list licenses #, expiration date, etc.

   _____

   _____

3. **Disciplinary Action:** Has the Contractor ever received any disciplinary action, or any pending disciplinary action, from any regulatory bodies or professional organizations? If "Yes", state the name of the regulatory body or professional organization, date and reason for disciplinary or impending disciplinary action.

   Yes ___ No ___

REFERENCES

Provide at least two (2) references that Contractor has provided veterinary services to within the past five (5) years. The contact person named should be familiar with the Contractor and **be willing to respond to questions** regarding the type, level, and quality of service provided.

Reference No. 1:

Firm/Company Name:_____

Contact Name: _____ Title: _____

Address: _____

City:_____State:_____Zip Code:_____

Telephone No. _____Fax No: _____

Email: _____

Date and Type of Service(s) Provided: _____

_____

Reference No. 2:

Firm/Company Name:_____

Contact Name: _____ Title: _____

Address: _____

City:_____State:_____Zip Code:_____

Telephone No. _____Fax No: _____

Email: _____

Date and Type of Service(s) Provided: _____

_____

Reference No. 3:

Firm/Company Name:_____

Contact Name: _____ Title: _____

Address: _____

City:_____State:_____Zip Code:_____

Telephone No. _____Fax No: _____

Email: _____

Date and Type of Service(s) Provided: _____

_____

RESUME AND LICENSES

Include resume(s) and license(s) for Contractor and other key staff members proposing to perform service under this contract. **ATTACHMENT B**

City of San Antonio

CONTRACTS DISCLOSURE FORM

Please complete Attachment B and submit with your submittal package.

Contracts Disclosure Form may be found at

https://webapp1.sanantonio.gov/ContractsDisclosure/

Instructions for completing the Contracts Disclosure form are listed below:

1. Complete all fields in the electronic form. Note: All fields must be completed prior to submitting the form.
2. Click on the “Print” button and place the copy in proposal response as indicated in the Proposal Checklist.

ATTACHMENT C

LITIGATION DISCLOSURE FORM

Respond to each of the questions below by checking the appropriate box. Failure to fully and truthfully disclose the information required by this Litigation Disclosure form may result in the disqualification of your proposal from consideration or termination of the contract, once awarded.

Have you ever been indicted or convicted of a felony or misdemeanor greater than a Class C in the last five (5) years?

Yes ___ No ___

Have you been terminated (for cause or otherwise) from any work being performed for the City of San Antonio or any other Federal, State or Local Government, or Private Entity?

Yes ___ No ___

Have you been involved in any claim or litigation with the City of San Antonio or any other Federal, State or Local Government, or Private Entity during the last ten (10) years?

Yes ___ No ___

If you have answered "Yes" to any of the above questions, please indicate the name(s) of the person(s), the nature, and the status and/or outcome of the information, indictment, conviction, termination, claim or litigation, as applicable. Any such information should be provided on a separate page attached to this form and submitted with your proposal.

ATTACHMENT D

SIGNATURE PAGE

By submitting a proposal, Contractor represents that:

If Contractor is a corporation, Contractor will be required to provide a certified copy of the resolution evidencing authority to enter into the contract, if other than an officer will be signing the contract.

If awarded a contract in response to this RFA, Contractor will be able and willing to comply with the insurance and indemnification requirements set out in RFA.

Contractor has fully and truthfully submitted a Litigation Disclosure form with the understanding that failure to disclose the required information may result in disqualification of proposal from consideration.

Contractor agrees to fully and truthfully submit the General Information form and understands that failure to fully disclose requested information may result in disqualification of proposal from consideration or termination of contract, once awarded.

If submitting your proposal by paper, complete the following and sign on the signature line below. Failure to sign and submit this Signature Page will result in rejection of your application.

Signature: _____

Printed Name: _____

Title: _____