

adoption application

Na	lame of Pet:	Date:		Time Received:		
Fir	irst Name:	Last Name:		Date of Birth:		
Cu	urrent Street Address:					
	ity:State:					
	H) Phone: (C) Ph					
	mail Address:					
1.	. Have you ever been convicted of a crime in	volving violenc	e, neglect, o	or cruelty to animals?	□ No	
2.	Have you ever had animals taken from you by law enforcement or animal control for any reason? ☐ Yes ☐ No					
3. Do you own or rent your home? ☐ Own ☐ Rent (If renting, landlord's information))	
	Landlord's Full Name:		l	_andlord's Phone:		
4.	. Type of Home: ☐ House ☐ Apartment ☐ T	ouse □ Apartment □ Townhouse □ Mobile □ Other (Specify)				
5.	Vhere will this pet be kept during the day? ☐ Loose indoors ☐ Crated ☐ Fenced Yard ☐ Other:					
6.	Where will this pet be kept at night? ☐ Loose indoors ☐ Crated ☐ Fenced Yard ☐ Other:					
7.	Are there other adults at home? ☐ Yes ☐ No If yes, specify:					
8.	Are there children at home? ☐ Yes ☐ No If yes, specify age(s):					
9.						
	If yes, what kind and how many?					
	Current Pet(s) Name(s):					
	Are your current pets kept □ indoors □ outdoors or □ both? Are your current pets spayed or neutered? □ Yes □ No					
	Are your current pets up to date on vaccina	ations? ☐ Yes	□ No (Proof of vaccinations is requir	red)	
	Name of veterinarian:			Phone:		
10.	O. Are you looking for a pet for □ yourself or					
	Are you looking for a pet for □ indoors or for □ outdoors or for □ both?					
12	Are you looking for \square Companionship \square Security \square Gift \square Other:					

13.	3. Do you or anyone in your household have allergies towards animals? ☐ Yes ☐ No				
14.	Are you active duty military? \square Yes \square No If yes, Please list the name and number of the person responsible for				
	caring for your pet in case of deployment:				
	Name:	Phone:			
15.	Please list the name and number of a personal reference (<u>NOT</u> living with you and <u>NOT</u> a family member) who can				
	answer questions about you and your home as they relate to your suitability as a pet owner:				
	Name:	Phone:			
knc	ereby swear that the answers given by me on this applic owledge. I have full knowledge that no animal will be ac curate information on the Adoption Application or the A	dopted to a person who misleads or fails	•		
Арр	plicant Signature:	Date:			
Co-	-Applicant Signature:	Date:			
OFI	FICE USE ONLY				
Hor	meownership verified or landlord contacted: \square Yes \square N	o			
Pet	ts are approved in this home: ☐ Yes ☐ No				
Vet	treference is favorable: ☐ Yes ☐ No ☐ N/A				
Cur	rrent animals are vaccinated: ☐ Yes ☐ No ☐ N/A				
Mil	litary deployment plan verified: ☐ Yes ☐ No ☐ N/A				
Per	rsonal reference is favorable: 🗆 Yes 🗖 No				
Me	eet and greet between pets and children was favorable: [∃Yes □ No □ N/A			
Ma	andatory requirements for adoption have been met: \Box Ye	es 🗆 No			
Ado	option is Approved Not Approved				
Sta	aff Signature:	Date:			