

Adoption Application

Name of pet(s) you are interested in adopting: _____

Personal Information:

Your Name _____

Address _____

City, State, Zip: _____

Home Phone: (____) _____ - _____ Mobile Phone: (____) _____ - _____

Co-applicant

Name _____

Address _____

City, State, Zip: _____

Home Phone: (____) _____ - _____ Mobile Phone: (____) _____ - _____

Place of employment (applicant) _____

Title/Dept. _____ Length of time on job _____

Work Phone: (____) _____ - _____ Email Address: _____

Place of employment (co-applicant) _____

Title/dept. _____ Length of time on job _____

Business phone _____

How long have you lived at your current address? _____ Years _____ Months

Do you rent or own? _____ Rent _____ Own

If you rent, provide Landlord name, address and phone: _____

Do you have permission from your landlord to get a pet? _____ Yes _____ No

Are you aware of pet deposit and monthly fees (if any) required? _____ Yes _____ No

Do you have a fenced yard? _____ Yes _____ No

Type of Fence and height _____

If you do not have a fence are you prepared to walk your pet multiple times daily in spite of weather conditions (cold, hot, rain, snow, etc.)? _____ Yes _____ No

What is your family's lifestyle like? _____ Active and on the go _____ Quiet and relaxed

_____ Entertain frequently _____ Lots of kids in and out _____ Travel frequently

Do you have children? _____ Yes _____ No

If you have children, please list name(s) and age(s):

Name	Age

Why did you decide to get a pet? _____

What are you looking for in a pet? _____

Who will be responsible for taking care of the pet? _____

How many hours per day will the pet be alone? _____

Where will the pet stay when no one is at home? _____

When you are home? _____

At night? _____

How and how often will you exercise your pet? _____

Who will care for your pet when you are out of town (vacation, etc.)? _____

Under what condition(s) would you have to give up your pet? _____

Please list two personal references – at least one of which is NOT a relative - below that we may contact and have knowledge of your habits as a pet owner.

Name Phone number

Name Phone number

Current and Previous Pet Information

Please provide the following information about your **current** pets:

Name	Breed	Age	Spayed/Neutered
			_____ Yes _____ No
			_____ Yes _____ No
			_____ Yes _____ No
			_____ Yes _____ No
			_____ Yes _____ No

If applicable, please provide the following information about any pets you have had **in the last 5 years** that are no longer with you:

Pet Name and Type	Reason Pet Is No Longer With You

Current Vet Name: _____

Practice Name: _____

Address: _____

City, State, Zip: _____

Phone Number: (____) _____ - _____

Agreements for Adoption:

I am prepared to make a 10 to 15 year commitment to my pet.

I will keep my pet on a regular routine of heartworm preventative.

I will provide flea/tick control as needed.

I will work with my vet and agree on a regular schedule for wellness visits, inoculations, and any other tests we agree are necessary for the health and well-being of my pet,

I will not chain or tie-up my pet and leave it outside along. My pet will be an indoor pet and an important member of my family.

If, for any reason, I am unable or unwilling to keep this pet, I agree to return him/her to the Original Pet Owner. I will not give this pet away, take it to a shelter, place him/her with another person or family member, or sell this pet to any other person without the express permission of the original Pet Owner.

I am financially able to provide routine and emergency care for this pet for his/her lifetime. This includes but is not limited to food, boarding (if necessary), regular vet care, heartworm preventative and flea and tick preventative.

Signature: _____

Date: _____

Printed Name: _____

PLEASE DON'T FORGET: EMAIL your adoption application to:

littlepups2017@gmail.com – Thank You!

Thank you for your interest in adopting from Second Chance!

Checkout our website: www.secondchancehabitat.org