



Adoption Application

Animal Applied For: _____ Date: _____

IN ORDER TO BE CONSIDERED AS AN ADOPTER TODAY, YOU MUST:

- Be 18 years of age or older
- Have identification
- Have the knowledge and consent of your landlord and/or parent if you live at home.

WELCOME TO THE HUMANE SOCIETY MOUNTAIN SHELTER: We are glad you have come to adopt a new pet from our shelter.

The following information is required so that we can assist you in the selection of a new pet. The animal's welfare is our foremost consideration. The consultation process is designed to help us determine if the adoption is in the animal's best interest, and to assist you in finding an animal compatible with your lifestyle. **NOTE: THE PROVIDING OF FALSE INFORMATION HEREIN WILL RESULT IN THE FORFEITURE OF ADOPTION FEES AND ANY ANIMAL ADOPTION. HSMS RESERVES THE RIGHT TO DECLINE ANY ADOPTION.**

(PLEASE PRINT)

Your Name: _____ Spouse's Name: _____

Current Address: _____ Apt# _____ Phone # _____

City: _____ State: _____ Zip: _____ Email: _____

1. What is the name of your veterinarian or veterinary clinic? _____ Phone# _____
2. How long have you lived at the above address? _____
3. Please check any of the following reasons for adopting this pet. Family Pet: _____ Childs Pet: _____ Watchdog: _____ Companion: _____ Breeding: _____ Hunting: _____ Barn Cat: _____ Companion for other pet: _____ Gift: _____
4. Do you live with your parents or relatives? Yes: ___ No: ___
5. Are you interested in adopting for yourself? Yes: ___ No: ___
6. Do you own or rent? Own: ___ Rent: ___
7. Do you live in a House: ___ Apartment: ___ Condo: ___ Mobile Home: ___ Duplex: ___ Townhouse: ___
8. Does your lease allow pets? Yes: ___ No: ___
9. What is your landlord's name and/or the name of the apartment/rental complex?

10. How many people live in your household? _____
11. Do all the members know that you plan to adopt a pet? _____
12. What are the ages of any children/grandchildren in your household? _____
13. Does any members of the household have allergies? _____
14. Will an adult be in the home during the day? Yes: ___ No: ___ Part Time: ___
15. Who will be responsible for taking care of the pet? _____
16. If adopting a dog or puppy, what procedures will you use for housebreaking? _____
17. If the pet you are adopting begins chewing, scratching, or other destructive behavior. How will you correct this?

18. Have you ever adopted from HSMS or another shelter or rescue? Yes: ___ No: ___ When? _____
Where is that pet now? _____
19. How many cats and/or dogs have you owned in the past five years? Dog: _____ Cats: _____
Where are those pets now? (Be Specific) _____
20. Have you ever turned in an animal to animal control or animal shelter? Yes: ___ No: ___

21. Have you ever had to find another home for a pet? Yes: ___ No: ___
If yes, When and Why? _____
22. Has a dog died on your premises of distemper, parvo, or unknown causes within the last three (3) months?
Yes: ___ No: ___
23. Has a cat died on your premises of distemper, leukemia, or unknown causes within the last three (3) months?
Yes: ___ No: ___
24. Do you currently own a pet? Yes: ___ No: ___
25. Do your pets live indoors: ___ Outdoors: ___ Both: ___
26. Are their shots up to date? Yes: ___ No: ___
27. If you currently own a dog, is it on heartworm preventative? Yes: ___ No: ___ What type? _____
28. Are they spayed or neutered? Yes: ___ No: ___ If no, Why not? _____
29. Do your pets currently wear ID tags? Yes: ___ No: ___ Type? _____
30. What is your plan for the care of your pet should it out live you? (Be specific) _____

31. Are you willing and able to go to the expense and trouble of taking your pet to a veterinarian for full preventative and medical care, including shots, heartworm preventive, flea treatment, grooming, quality food, and emergencies?
Yes: ___ No: ___
32. Will your new pet live inside? Yes: ___ No: ___
33. Will pet have access to the entire house? Yes: ___ No: ___ If not, where will pet be allowed? Outside only: ___
Garage only: ___ Basement only: ___ Laundry Room: ___ Other: ___
34. Is there a yard available? Yes: ___ No: ___ How large is your yard? _____
Is your yard completely fenced Yes: ___ No: ___ How tall is the fence? _____
Do you have an invisible fence? Yes: ___ No: ___
Is there a dog house? Yes: ___ No: ___ Do you plan to use a pen? Yes: ___ No: ___ How large of a pen? _____
Will you be chaining or putting dog on a runner? Yes: ___ No: ___ For what length of time? _____
35. What do you plan to do with your pet when you go on vacation? _____
36. For which of the following reasons would you give up your pet or return it to the shelter? Moving: ___ New baby: ___
Not getting along with children: ___ Divorce: ___ Getting out of the fence: ___ None: ___ Got to big: ___ Barking: ___
Behavior problems: ___ Loss of interest: ___ Too time consuming: ___ Shedding: ___ Financial: ___ Allergies: ___
Medical problems: ___ Other: _____
37. Have you or anyone in your household ever received a citation for an animal related violation? Yes: ___ No: ___

FOR SHELTER USE ONLY- DO NOT WRITE BELOW THIS LINE.THANK YOU

Information checked by: _____ Approved: _____ Refused: _____ Date: _____

Restriction/Reason for Refusal: _____

Was a memo written in pet point? Yes: ___ No: ___