

City of Easton Animal Control



DOG ADOPTION APPLICATION (Please Print Clearly & Answer all Questions.)

Applicant's name _____

•Are you at least 18 years old?

Yes _____ No _____

Local Address _____ Apt# _____

City _____ State _____ Zip _____

Home Phone _____ Email _____

DESCRIPTION OF RESIDENCE:

Do you Rent? _____ Own? _____

House Property owner's name: _____ Phone _____

Apartment How long have you lived here? _____

Mobile-Home _____

Duplex #Adults in house _____ #Children _____ Children's Ages _____

WHAT PETS DO YOU CURRENTLY HAVE IN YOUR HOUSEHOLD?

KIND	SPAY/NEUTER	KEPT WHERE?	TIME OWNED	AGE
Dog	__ Cat	__ Yes __ No __	__ In __ Out __	__
Dog	__ Cat	__ Yes __ No __	__ In __ Out __	__
Dog	__ Cat	__ Yes __ No __	__ In __ Out __	__
Other	__	__ Yes __ No __	__ In __ Out __	__

LIST PREVIOUS PETS

KIND	SPAY/NEUTER	KEPT WHERE?	WHAT HAPPENED TO PET	
			TIME OWNED	
Dog	__ Cat	__ Yes __ No __	__ In __ Out __	__
Dog	__ Cat	__ Yes __ No __	__ In __ Out __	__

Continue to Page 2

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Fenced Yard? Yes NO Height? Type?

- What is the name of your veterinarian? _____
- Veterinarian's address _____
- How long have you used this Vet? _____
- Who will be responsible for the daily care/feeding of this dog?

- Reason for wanting this dog? _____
- Where will you keep this dog? _____
- Where will you keep this dog when you TRAVEL? _____
- Do all members of this household *WANT* this dog? _____
- If you have young children, they need to be educated on how to interact with the dog in order to prevent dog bites, are you able/willing to do that? Yes No
- How long will you give this dog to adjust to its new home? _____
- How many hours will your dog spend alone? _____
- If you must give up this dog, what would you do with it? _____

What will you do if your dog shows destructive behavior? (Digging, chewing, jumping, tearing up plants/furniture or running off)

- Do you realize that you will probably have to housetrain your new puppy/dog?
____Yes ____No
- Would you like information on how to housetrain a new puppy or dog?
____Yes ____No
- If adopting an adult dog, how many times per day will you exercise it? 1 2 3
- What form of exercise will you provide for your dog? _____
- What form of **training** will you provide your dog?
____Obedience class ____Follow training books ____Professional training ____Home training
- Will you have your dog **SPAYED OR NEUTERED** within the **30 Day** time Frame? (A surgical operation to prevent parenthood for animals) Yes No
- Where/who will perform the surgery?

Are you familiar with heartworm disease? Yes No

- Will you maintain your dog on heartworm preventative?
____Yes ____No
- Do you realize that dogs often live longer than 10 years and are you willing to assume responsibility for that long? Yes No
- How will you keep the dog confined to your property? (**Check all that apply**)
____House ____Kennel ____Fence ____Chain ____Patio ____Garage ____Leash ____Other
- Have you applied to adopt from this shelter before today? Yes No
Date: _____ Pet Adopted? Yes No

If yes, where is this animal now? _____

I certify the above is true and that false information may result in nullifying this adoption. The City of Easton has the right to refuse adoption to anyone. I understand that no animal can be held for me.

Signature _____ Date _____