

Street Paws Preliminary Adoption Application

This questionnaire must be completed by anyone interested in adopting a pet from Street Paws. We at Street Paws try to place our animals into permanent and responsible homes while matching the pet to you and your lifestyle. NOTE: THE PROVIDING OF FALSE INFORMATION HEREIN WILL RESULT IN THE FORFEITURE OF ADOPTION FEES AND ANY ANIMALS ADOPTED. Street Paws reserves the right to refuse any applicant.

I agree

In order for your application to proceed without delay, please add info@streetpaws.com to your email safe list to prevent our email reply going directly to spam. Please call ahead to your vet to release ALL vet history. Please list all vet offices you have used on your application. If your pet was spayed/neutered at an alternate location please either provide documentation or the vet name and phone number where the pet was altered. If you do not have vet history/reference please indicate no vet history below.

I have read and understand

Date: _____

Pets name you are interested in adopting: _____

Where did you hear about this pet? _____

Name (first and last): _____

Address: _____

Street Address: _____

City: _____

State: _____

Zip Code: _____

Email (required): _____

Cell Phone #: _____

Home Phone #: _____

How long have you lived at the above address? _____

What type of pet are you looking for?

Dog Cat Puppy Kitten

Please indicate the reason for adopting a pet (check all that apply)

Family Pet/Companion Child's Pet Watchdog, Guard Dog for Business, Hunting Dog

Barn Cat/Mouser Companion for Pet

Are you or your spouse currently employed?

Yes No

If no, please explain if yes write NA:

Occupation & hours/days worked per week: _____

Are you 21 years of age or older?

Yes No

Age/date of birth: _____

Do you live with your parents, other relatives or friends? _____

Alone Spouse/Partner Parent Roommate(s)

Are you interested in adoption for?

Yourself Family Friend

Do you live in a:

House Apartment Condo Mobile Home Duplex/Townhouse

Do you own your home?

Yes No

If no, does your lease allow pets?

Yes No

own home

List landlord/apartment complex name & phone number or NA if you own your home:

How many times have you moved within the past 5 years?

How many people live in your household? List relationship and ages:

Do all members know that you plan to adopt a pet?

Yes No

What are the ages of any children in your household?

Does any member of the household have allergies to pets? _____

Will an adult be home during the day? _____

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

If adopting a dog or puppy, what procedures will you use for housebreaking? If applying for a cat enter NA. _____

How will you handle chewing or destructive behavior?

If adopting a cat or kitten, how will you handle scratching or destructive behavior? If not applying for a cat/kitten enter NA.

Do your current cats have their claws? _____

Yes No Not applying for a cat Never owned a cat

Have you ever declawed your cat/kitten? Do you plan to declaw in the future? Please explain. I applying for a dog enter NA.

Have you ever adopted from Street Paws or another shelter?

Yes No

If yes, which shelter? If no, enter NA. _____

Where is that pet now? Be specific:

How many cats, dogs, puppies or kittens have you owned in the past 10 years?

- Dog Puppy Cat Kitten

Where are these pets now? Be specific and list each pet's name and how long you have had them.

If pet is deceased, please list cause of death (for each one and list their name):

Have you ever turned an animal into Street Paws or another shelter/animal control?

- Yes No

If yes, under what circumstances? If no, enter NA.

Have you ever had to give up one of your own pets?

- Yes No

If yes, under what circumstances? If no, enter NA.

Has a dog/puppy died on your premises of distemper, parvo or unknown causes within the last 24 months?

- Yes No

Has a cat/kitten died on your premises of distemper, leukemia or unknown causes in the last 24 months?

- Yes No

Do you currently own a pet?

- Yes No

What type/kind? Dog, Cat, Other and how many of each?

Please list the pets name(s) with age, sex and breed:

Do/did your current/past pets live indoors or outdoors?

Indoors only Outdoors only Indoors only with outside access to potty

Outdoors only and brought inside during severe weather

Are/were your current/past pets shots up to date?

Yes No

If no, explain and be specific if yes write NA.

Are/were your current/past pets spayed or neutered?

Yes No

If no, please explain and be specific if yes write NA.

What type of pet food do you feed? _____

Are/were your dogs/cats on heartworm preventative?

Yes No

If yes, which brand/product? _____

If yes, where do/did you purchase heartworm preventative?

Vet Clinic Online with a prescription

Current/most recent vet clinic used:

Vet phone # _____

Additional vet clinics that have cared for your pets:

Vet phone #: _____

In whose name are the vet records listed (if other than yourself)?

Are you willing to go to the expense and trouble of taking your new pet to a veterinarian for full preventative healthcare AT LEAST once a year?

Yes No

Where will your new pet live?

Indoors only Outdoors Indoors only with outside access to potty

Outdoors only and brought inside during severe weather

Where will your pet sleep?

When home alone, pet will be:

Loose inside of home Crated inside of home In garage or basement Outside

Allowed to roam property

Is there a yard available?

Yes No

If yes, is the yard completely fenced?

Yes No

How tall is the fence?

6 foot 4 foot

What type of fencing?

Chain link Wooden Privacy Cattle Wire

Is there a dog house?

Yes No

What do you plan to do with your pet when you go on vacation?

If you have to move, what would you do with the pet?

Would you object to an authorized representative of Street Paws inspecting the animal and premises where the animal is being kept?

Yes No

Please list driver's license # and state issued: _____

Have you ever been convicted of a felony? If yes, please explain.

Is there anything else you would like for us to know?

I authorize Street Paws to contact the veterinarian office named above to confirm the medical records/history of my pets. By electronically signing below, I attest to the truthfulness of all my answers and that I have read, understood and agree with the following information. Falsification of any information above will be grounds for rejection of this application and possible removal of adopted pet from my home. Applicant must be 21 years of age or older. Although Street Paws works towards socialization of all animals and would not adopt out an animal that has demonstrated aggressive or potentially harmful behaviors, in submitting this form, I understand and agree that neither Street Paws nor any person or entity associated with, or working with, or on behalf of or as agent of Street Paws is liable for any injury(s), illness or damages that may result from my/our adoption of any animal. I also understand every effort has been made to insure the animal is healthy and all available medical information will be provided at adoption. Animals will be spayed or neutered and have age appropriate vaccinations prior to adoption. Street Paws strongly encourages all adopters to take their new pet to their veterinarian for an exam (at their expense) within 15 days of adoption. Street Paws is not responsible for further medical needs including but not limited to routine vaccinations, internal parasites, fleas, ticks, ringworm, upper respiratory infections, or other medical problem. I also understand that if I can no longer keep the pet, I will contact Street Paws immediately to discuss placement of the pet. The pet shall not be given away, sold or exchanged without prior written permission of Street Paws. This application does not commit you to an adoption. It is used to screen those interested to make sure the home is a good match for the pet.

Signature: _____ Date: _____