



Spay & Neuter Abandoned Cats & Kittens, Inc.  
P.O. Box 121  
Sunbury, OH 43074-0121

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### ADOPTION APPLICATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Apt#: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_

Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Are you a student? \_\_\_\_\_ School: \_\_\_\_\_

How many people currently reside in your household? \_\_\_\_\_

Number and ages of children in household: \_\_\_\_\_

Does any member of the family have any allergies to animals? Yes ( ) No ( )

Number of companion animals in your household: \_\_\_\_\_

Describe the companion animals you care for in your household:

Name	Breed	Age	Kept where	Time in your care

Are your companion animals spayed or neutered? \_\_\_\_\_

Have all other cats in your home tested negative for FELV and FIV? \_\_\_\_\_

If you do not have companion animals now, have you had any in the past? \_\_\_\_\_

When? \_\_\_\_\_ What happened to them? \_\_\_\_\_

Veterinarian name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Are your companion animals current on their vaccinations? Yes ( ) No ( )

Are you financially able and willing to provide annual checkups, vaccinations, and ANY medical care necessary? Yes ( ) No ( )

Reference name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relative name: \_\_\_\_\_ Phone: \_\_\_\_\_

Do you rent? \_\_\_\_\_ Own? \_\_\_\_\_ Live with parents? \_\_\_\_\_

Is it a condo, house, apartment or mobile home? \_\_\_\_\_

Landlord/parent name, if applicable: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of apartment complex: \_\_\_\_\_

How long have you lived in current residence? \_\_\_\_\_

If you move, what will you do with the cat you plan to adopt? \_\_\_\_\_

Have you ever adopted a pet from a rescue group or humane society? \_\_\_\_\_

When? \_\_\_\_\_ Have you ever had an application rejected for adoption of an animal from a rescue/animal control facility? Yes ( ) No ( ) If yes, please explain:

\_\_\_\_\_

Why are you interested in adopting a cat? \_\_\_\_\_

Do you intend to declaw\* this cat? \_\_\_\_\_

\*Spay and Neuter Abandoned Cats and Kittens does **not** endorse or support declawing of cats, and will not pay for or ask our veterinarians to perform this surgery. We strongly encourage adopters to learn about the realities of declawing before subjecting any cat or kitten to this surgery. If you are looking for a declawed cat, please adopt one that has already had this procedure done. For more information on declawing, please visit [www.declawing.com](http://www.declawing.com)

Will this cat be an indoor or outdoor pet? \_\_\_\_\_

Do you understand that

- Cats require time to adjust to your home and family?
- Cats may chew or eat items in your house and/or scratch your furniture?
- Cats may exhibit inappropriate litter box or marking behaviors?

What steps would you take to correct these behaviors:

\_\_\_\_\_

What precautions would you take to properly introduce a new cat into your home if you have other animals? \_\_\_\_\_

What will you do if your new cat does not get along with your present companion animal?  
\_\_\_\_\_

Would you allow us to make a follow-up visit or call? \_\_\_\_\_

When is the best time to reach you at home? \_\_\_\_\_

**All cats placed by Spay and Neuter Abandoned Cats and Kittens, Inc. are neutered or spayed and are current on shots.**

**Adoption fee is \$65 and is nonrefundable.**

- I understand that Spay and Neuter Abandoned Cats and Kittens, Inc. reserves final judgment on adoption applications in order to match cats with the best homes. I further understand that this application is subject to verification and may be denied. By signing this application I give representatives of Spay and Neuter Abandoned Cats and Kittens, Inc. permission to contact my references, veterinarian, and landlord/rental agency to verify contents of this application.
- I confirm that all of the information that I have provided in this application is true to the best of my knowledge. I understand that providing false information on this application will be grounds for denial of the application.
- I agree that, in the event this adoption is not successful for my family or the adopted cat within a month, I will return the cat to Spay and Neuter Abandoned Cats and Kittens, Inc. and not surrender it to another rescue group, humane society, animal control facility, or any other agency. If events arise that prevent me from keeping the cat after a month has passed, I agree to work with Spay and Neuter Abandoned Cats and Kittens, Inc. to either find another home for the cat or work the cat back into their care as space allows. I will not surrender the cat to another rescue group, humane society, animal control facility, or any other agency, but will work with Spay and Neuter Abandoned Cats and Kittens, Inc. to successfully place the cat in a safe situation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**For Spay and Neuter Abandoned Cats and Kittens, Inc. use:**

Cat(s) Name(s): \_\_\_\_\_

Approved: \_\_\_\_\_

Denied (reason): \_\_\_\_\_

Adoption Representative: \_\_\_\_\_ Date: \_\_\_\_\_