

SAFE HAVEN ANIMAL RESCUE

CAT ADOPTION APPLICATION

DATE: _____

Name of Cat(s) You Are Interested in Making a Part of Your Family: _____

Name: _____ Significant other if adopting together: _____

Address: _____ Apt: _____ Town: _____ State: _____ Zip: _____ :

HomePhone: _____ Cell Phone: _____ Email: _____

Employer: _____ Job Title: _____ Employed Since: _____

Significant Other Employer: _____ Job Title: _____ Employed Since: _____

Date of Birth (**WE DO NOT ADOPT TO ANYONE UNDER THE AGE OF 21**):

How did you hear about Safe Haven Animal Rescue? _____

How long have you been considering adopting a cat? _____

Where do you live? House / Apartment / Condo / Trailer / Other: _____ How long at present address? _____

Please check your living situation: Own Your Home _____ Rent Your Home _____ Rent An Apt _____

Live with Parents / Family / Friends (include name(s)): _____ Phone #: _____

Landlord's Name: _____ Landlord's #: _____ Is a deposit required: _____

Do you have a fenced in yard? _____ How high is the fence? _____ Same height throughout property perimeter? _____

Does your spouse / significant other / roommate know that you are adopting an animal? _____

What is his / her name and phone # so that we may confirm? _____

of adults in the home: _____ Age(s): _____ # of children in the home: _____ Age(s): _____

Is anyone in the home allergic to animals? Yes: _____ No: _____

Have you ever been denied to adopt by another rescue organization or animal shelter? Yes: _____ No: _____

If yes, please explain _____

In the event that you move in the future, what will happen to your pets?

In the event that you will no longer be able to care for this /these cat(s), what will happen to your him / her?

ABOUT YOUR PETS & VETERINARY CARE:

Who is your veterinarian? _____ Phone # _____

How long have you been using this vet? _____ Whose first & last name is the account under? _____

Is the address on this application the address on file at your vet's office? _____

Which of your pets has this vet been caring for? _____

Information if you use a second veterinarian: _____

WHAT TYPE(S) OF PETS DO YOU OWN OR HAVE OWNED IN THE LAST 10 YEARS?

NAME	TYPE/BREED	AGE	SPAY/NEUTERED?	GENDER	STILL ALIVE?

ANIMAL SURRENDERING:

Have you ever given up or surrendered a pet to a shelter? _____

If so, why: _____

Please check all reasons why you would give up a pet or surrender a pet to a shelter:

Allergies _____ Moving to a place that doesn't allow pets _____ Financial difficulties _____

Not getting along with other animals _____ Animal behavior _____ New baby _____

Work commitments / change in schedule _____ Other _____ Never _____

IF YOU CURRENTLY HAVE A CAT(S), ARE THEY:

Indoor _____ Outdoor _____ Both _____

Declawed? _____ If yes, reason for declawing: _____

Up to Date on Vaccinations? _____ If not, why? _____

Results of FIV & Felv Testing: Negative _____ Positive _____ Not sure: _____ **PLEASE**

PLEASE PROVIDE THREE (3) REFERENCES BELOW (Non-Relatives):

NAME	PHONE #	RELATIONSHIP TO YOU

A home check is required as part of the adoption application process to ensure the home is a safe environment for the cat(s) you are adopting. Do you agree to allow one of Safe Haven Animal Rescue’s representatives to visit your home?

Yes _____ No _____

DAY TO DAY CARE OF THE CAT(S):

How many hours a day will the cat(s) be left alone? _____

Will your new cat(s) be allowed outside? _____

Do you have plans to declaw your new cat(s)? _____ If yes, why? _____

What do you estimate the annual cost of caring for the cat(s) be (includes food, veterinary care, licenses, toys)? _____

Are you willing to allow time (up to 2 to 3 weeks) for the cat(s) to adjust to its new home? _____

If behavioral problems arise, what steps will you take to work through them?

Why do you believe you are the best choice for this cat(s)? _____

Who are you adopting this cat(s) for? _____

Will this cat(s) be living at the address provided in this application? _____

Cats & kittens enjoy the company of one another while you’re away. If you do not have another young cat or kitten at home currently, would you consider adopting two? YES _____ NO _____ MAYBE _____

NON-REFUNDABLE ADOPTION FEE: \$175

The adoption fee includes the following: Spay / Neuter, Age Appropriate Vaccinations, FIV & Feline Leukemia test (all cats are negative), Stool test, Deworming, Microchipping and Transport to our rescue. It also includes all vetting and medications, if necessary, the cat has had while under our care.

Please initial if you understand the fee breakdown _____

Adopting an animal is a commitment for the LIFE OF THE ANIMAL. Cats can live, on average, for 15 years. Some cats may live into their 20s. If you adopt, are you willing to commit to this cat(s) and care for him / her for the duration of their life? _____

FOSTER WITH THE INTENT TO ADOPT

By law, rescues cannot adopt out any animal that is not spayed/neutered. Therefore, if the kitten or cat you are interested in adopting is not fixed at the time you bring him or her home, this application will be considered a Foster With Intent to Adopt (FIA) application. An FIA’s responsibilities include bringing the cat to our veterinarian (at SHAR’s cost) when:

- ξ Vaccinations are due.
- ξ The cat is age appropriately ready to be spayed / neutered
- ξ The cat is in need of routine medical attention (excluding the cat getting hurt while in your home)

When the foster-with-intent-to-adopt contract is signed, the full adoption fee is due. The spay/neuter date will be agreed upon when signing the contracts. You are considered a FOSTER until the day of their spay/neuter surgery, which is when the adoption is FINALIZED.

Should you fail to keep the rescheduled spay/neuter appointment, NYSHAR reserves the right to take possession of the cat, at which time the adoption fee will **NOT** be refunded.

NYSHAR will cover the cost of medical care at our selected veterinarians if the medical issue is an upper respiratory infection, eye infection, ear mites, worms, etc. up to the day of spay/neuter.

NYSHAR will NOT cover the cost of vet care if you bring the animal to a veterinarian other than the rescues selected vet.

NYSHAR will NOT cover the cost of vet care (regardless of the veterinarian used) if the injury is similar to a twisted or broken ankle, blockage from ingestion of an object, etc.

I have read, understand and agree to the Foster With the Intent to Adopt section in its entirety (Initial) _____

I, the undersigned, agree to the following statements (please initial after each statement):

- The information I provide will be verified before I am approved for adoption _____
- False statements or omissions of any of the above information will result in an automatic refusal of adoption or confiscation of the animal _____
- If at any point AFTER the adoption of this pet it has been discovered that any statements made to Safe Haven Animal Rescue were false, we have the right to confiscate said pet from your home, making the adoption void _____
- Safe Haven Animal Rescue has the right to refuse the adoption of any animal to any person _____
- All adoption fees are non-refundable _____
- I am financially capable of meeting all the needs of this animal(s) I am interested in adopting _____

NOTE: Completion of this application does not guarantee that you will be approved for the adoption of this pet. All applicants are subject to a reference and home check. WE ARE THE ANIMALS’ ONLY VOICE and need to ensure that we place him or her in the home that is best suited for the animal.

Applicant’s Signature _____ Date: _____

Applicant’s Driver’s License #: _____ State: _____ Expiration Date: _____