

ATTENTION RENTERS OR CONDO OWNERS: A COPY OF YOUR HOMEOWNER'S ASSOCIATION AGREEMENT OR YOUR LEASE, OR A NOTARIZED STATEMENT FROM YOUR LANDLORD/ASSOCIATION CONFIRMING THAT A LARGE DOG IS PERMITTED MUST BE ATTACHED OR THE APPLICATION CANNOT BE PROCESSED

Please provide the name and phone number of your landlord:

Landlord name: _____ Phone: _____

4. Do you have a completely fenced yard: Yes No If no, and you intend to fence, when? _____

What type of fence do you have or intend to have: Chain link Privacy Split rail with wire mesh Electric

Other _____

Height of Fence at lowest point _____ Approx. fenced area _____

5. How do you plan to exercise the dog and arrange for toilet duties, and who will supervise; will kids under 18 have responsibility?

6. Will the dog ever be in the yard/outside the house when you are not at home: Yes No

Under what circumstances: _____

7. Do you currently have any of the following (check all that apply):

Dog Door Outdoor Kennel Run Tieout Stake Overhead Cable Runner Outdoor Dog House

If there is a Dog Door, will the dog have access to the yard when you are not home?

If so, for how long? _____ **A home with a Dog Door must have a very secure physical fence with locking gates

8. Where will the dog stay while you are at work/out of the house? (check all that apply):

Basement Laundry Garage Crate Free in home Kitchen Yard

Outdoor kennel

Other: _____

9. Where will this pet sleep at night, please be specific: _____

10. What areas of the house or yard are off-limits to the dog: _____

11. Number of total hours dog will be alone each day: _____

Is someone available to come home mid-day? Usually Sometimes No

Is anyone home during the day: Yes No Please list who and the amount of time: _____

12. Please list all household members and the level of their responsibilities in regard to caring for a new dog: (include anyone that routinely cares for the dog in your home, e.g. Nanny, Housekeeper, Pet-Sitter, etc)

13. Do ALL household members want a new dog and are they willing to make a lifetime commitment: _____

14. Please describe your idea of a typical week day and week-end day in the pet's life; how do you plan to interact with your dog?:

15. Does anyone in your household have allergies to dogs or asthma: Yes No

How is this controlled: _____

16. Where will the dog stay when you travel or take vacation: _____

Do you travel regularly: Yes No If yes, how often: _____

17. If you have to move, what will you do with this dog: _____

18. Are you prepared to provide for the dog for the next 10 or more years: Yes No

19. Typical care for a healthy herder can range from \$500 to \$2500 per year. Will you be able to budget at least this amount? _____

Our current non-refundable adoption fees range from \$500 to \$750. Will you be able to budget at least this amount? _____

20. What brand of dog food do you currently use or plan on using for this dog: _____

How many times a day do you feed or plan on feeding? Free feed Once Twice More

21. Would you be willing to attend a formal obedience class if required: Yes No

22. Have you ever crated a dog: Yes No Are you willing to do so now: Yes No

If you prefer not to crate, why: _____

23. Please list all pets that have **resided in your home** in the last 10 years:

BREED/Name (example: Collie Sheltie)	GENDER Male / Female	AGE	NEUTERED Yes / No	WHERE IS PET NOW (PLEASE EXPLAIN)

24. Is there any additional information you would like us to know about these pets:

25. Has a dog ever been stolen, lost or died prematurely: Yes No Please explain:

26. Has it ever been necessary to sell or give a pet away, or surrender it to a shelter or Rescue: Yes No Please explain:

27. Please provide the name & phone number for two personal references (other than relatives)

****Please notify your references that they will be contacted** (home or cell numbers are better than work numbers):

1. _____ Phone _____

2. _____ Phone _____

28. If you currently have a pet, or have owned a pet in the past, please provide the name and phone number for your veterinarian:

1. _____ Phone _____

A COASTALFILL representative will contact the above personal and vet references. Please be sure phone numbers are accurate and please authorize your references (particularly your vet) to release information.

APPLICATIONS CAN NOT BE APPROVED UNTIL THE REFERENCE CHECKS HAVE BEEN COMPLETED

29. How did you hear about COASTAL: (Please check all that apply)

COASTAL website COASTAL event Veterinarian Shelter Ad TV Other _____

30. Have you ever applied to a shelter or rescue organization for adoption of a dog: Yes _____ No _____

If yes, please supply the name and location of the shelter or rescue, the date applied, and the result of your application:

31. What are the best times and days of the week to contact you: _____

32. Is there any additional information that you would like us to know (please use the back if more space is needed) :

33. ****Please print this form, initial and sign below in blue or black ink, and mail to the appropriate address.**

34. _____ (Initial) **I/We acknowledge that all information provided on this form is true and correct. I understand that any misrepresentations or omissions of fact may result in my not being approved and/or removal by COASTAL of the adopted dog from my possession.**

_____ (Initial) **I/We certify that any information transmitted to COASTAL by e-mail or any other means to supplement or to reactivate this application will be true and correct.**

_____ (Initial) **I/We certify that I have never been convicted of animal cruelty or neglect.**

**YOU MUST BE 21 YEARS OR OLDER TO SIGN THIS APPLICATION.
ORIGINAL SIGNATURES ARE REQUIRED TO PROCESS THIS APPLICATION.**

APPLICANT'S SIGNATURE _____ Date _____ CO-APPLICANT'S

SIGNATURE _____ Date _____

ALL OTHER ADULTS IN HOUSEHOLD MUST ALSO SIGN THIS APPLICATION:

_____ **Thank you for your \$25 Application Fee which will be used to help Rescued Herders get needed veterinary care.** I/We understand that this fee is non-refundable regardless of the outcome of this application.

_____ **I/We wish to support Coastal Sheltie Rescue+ by becoming a member of COASTAL for the current calendar year.** I have included \$40 for membership dues. Membership privileges include the COASTAL Newsletter, notification of COASTAL events.

_____ I/We have enclosed a stamped, self-addressed business size envelope for notification of application decision.

The application approval process may take several weeks and will include a home evaluation and reference checks. We are an all-volunteer organization so please be patient as we are often overwhelmed with the number of herding lovers who want to adopt from us. If you have any questions, please do not hesitate to contact the Application or Adoption Coordinators through our website, WWW.COASTALSHETLIERESCUE.ORG ****COASTAL reserves the right to reject any application based on information obtained during the approval process.** ADOPAPP 01/19 Choose a building block.