



Adoption Application

The information we request in this form is to ensure that we are finding a quality permanent home for our pets. This information assists us in achieving the best match between a pet and a potential new owner.

Your Name:	Co-Applicant:	
Address:		
City:	State:	Zip:
Home Phone:	Work Phone:	
Cell Phone:		
Email:		
Best Time of Day to be Contacted:		

Primary Residence: Own Rent/Lease

How long at this residence:

If you rent/lease, are pets allowed? Yes No

Is anyone home during the day? Yes No

How many hours would dog/cat be alone?

Where will the dog/cat stay when home alone?

Have you/anyone in the household ever owned a dog/cat? Yes No

Are there children in the household? Yes No

Do all adults in the household agree on adopting this dog/cat? Yes No

Do you have any neighbors, family, and/or friends who have children that will visit your home?

Yes Ages: No

Is there anyone in your household with asthma or allergies to cats/dogs?

Yes No

Will you allow us to conduct a home visit prior to adoption? Yes No

What do you do with your pets while on vacation?

Why are you interested in adopting this dog/cat?

Landlord Reference:

If you do not own your home, we will need to speak to your landlord to confirm you can have a cat/dog and discuss any pet restrictions on your lease; adults living in a home owned by their parents will need to list their parents as landlords. We highly recommend reviewing your lease and/or speaking to your landlord about your plans to adopt a cat/dog in advance; that way you will be aware of any restrictions and any fees that may be imposed in your lease.

What other pets do you currently have?

Type				
Breed				
Name				
Age				
Sex	Male	Female		
Spayed/Neutered?		Yes	No	

Type			
Breed			
Name			
Age			
Sex	Male	Female	
Spayed/Neutered?		Yes	No

Type			
Breed			
Name			
Age			
Sex	Male	Female	
Spayed/Neutered?		Yes	No

Where are these animals kept?

What other pets have you had in the past five years?

What happened to them? If any of your pets have passed away, please provide age and cause of death.

What kinds of problems, if any, did you have with them?

Have you ever surrendered a pet to or returned a dog/cat to a shelter?

Yes No

If yes, explain:

Have you ever given away or sold a dog/cat?

Yes No

If yes, explain:

Is there shade in the yard? Yes No
Is there shelter in the yard: Yes No
Do you have a dog door into house or garage? Yes No

Will the dog ever be left outside unattended? Yes No
If yes, for how long?
If no fence, how will the dog be let outside?

Are you looking for a dog as a: Companion Watchdog
Playmate for another dog Playmate for a child Gift for another person
Other

By submitting this application, I agree that:

1. If I am approved for adoption and I cannot keep the adopted dog for any reason, it will be returned to Paved Paws Animal League immediately.
2. I am authorizing, through submission of this form, the Veterinarian(s) named above to release any information and records concerning past or present care of animals to Paved Paws Animal League. I agree to hold harmless and indemnify said Veterinarian(s) for providing such information.
3. I have not, nor has anyone in my household ever been charged with any form of animal abuse, neglect, or cruelty.
4. I am 18 years of age and I have read this application in its entirety and have answered each question honestly and to the best of my ability.

Agree Disagree

Signature(s) of Applicant(s): (type your name)

Date: _____

Paved Paws Animal League
P.O. Box 26836
Greenville, SC 29616

pavedpaws@yahoo.com