

Date and Time Received: \_\_\_\_\_



# Dog Adoption Application

Phone: (336) 248-2706 PO Box 1791, Lexington, NC 27293  
davidsonhumane@gmail.com

In order to be considered as an adopter you must:

- Be 18 years of age or older
- Have a valid driver's license
- Have the knowledge and consent of your landlord (if you do not own your home)
- Be financially stable and willing to provide any necessary medical care
- Be able to provide a safe and loving environment for the pet

### Adoption Process:

- 1) If you meet the above criteria, please submit this application by mail, email, or in person during our office hours
- 2) Wait for response from HSDC volunteer (this may take up to two weeks)
- 3) Schedule meet-and-greet with pet and home check with foster parent
- 4) If you are approved and you fall in love with the pet, pay your adoption fee and take your new pet home!

\*\*\*Please have whoever will be the main caretaker of the pet fill out this application

### Adoptable Pets

Was there a specific pet you were interested in? Please list their name, sex, and if they are a dog or cat:

If not, what type of dog were you interested in?

Age? \_\_\_\_\_ Male or Female Breed: \_\_\_\_\_

\*\*\*Please visit [Petfinder.com](http://Petfinder.com) or [Adopt-a-Pet.com](http://Adopt-a-Pet.com) to view our currently available pets

### General Information

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

Date of Birth: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State Issued: \_\_\_\_\_

Address: \_\_\_\_\_

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

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

May we contact you via text message?  Yes  No

Email: \_\_\_\_\_

What is the best way to contact you?  Call  Text  Email

Occupation/Place of Employment: \_\_\_\_\_

## Home Information

Do you:  Own or  Rent

Type?  House  Townhome  Farm  Apartment – what floor? \_\_\_\_\_

Length of time at current residence? \_\_\_\_\_

Do you plan to move within the next 6-12 months?  Yes  No

If you rent, are pets allowed?  Yes  No Is there a size limit? \_\_\_\_\_

Pet Deposit?  Yes  No How much? \_\_\_\_\_

Is there an additional monthly charge per pet? \_\_\_\_\_

Property Manager's Name and Phone Number:  
\_\_\_\_\_

Do you have a fenced yard? (If so, what type, height, and approximate size of fenced area)  
\_\_\_\_\_

Do you have locks and/or latches on all your gates?  Yes  No  N/A

Do you have any of the following?  Balcony  Pool  Pet Door  None

How many adults live in your home and what is their relationship to you?  
\_\_\_\_\_

How many children live in your home and what are their ages?  
\_\_\_\_\_

Does anyone living in your home have any known pet allergies?  Yes  No

Is everyone in the home in agreement with the decision to adopt a dog/cat?  Yes  No

## Your Existing Pet's Information

Name of current or last Veterinary Clinic: \_\_\_\_\_

Phone number: \_\_\_\_\_ Address: \_\_\_\_\_

May we contact this vet as a reference?  Yes  No

Please list the name, type, age, gender, and if pet is spayed or neutered of all current animals  
(Ex- Duke, yellow lab, 1 ½ years old, male neutered)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list age, type, gender and if the pet was spayed or neutered for all animals you owned in the last five years (but no longer have) and what happened to them (Ex- Rosie, lab, spayed female, died of old age)

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Are your animals current on all vaccinations?  Yes  No (you may be asked to show proof)

In your opinion, how often should a dog/cat should go to the vet for routine exams?

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Do your current pets get along with other animals?  Yes  No  N/A

Have you ever rehomed a pet, returned a pet you adopted to a rescue, or returned/surrendered an animal to a shelter?  Yes  No

If yes, why? \_\_\_\_\_

How do you discipline your pets? \_\_\_\_\_

### Adoptive Pet Information

Why do you want to adopt a dog at this time?

- Companion for you  Other: \_\_\_\_\_  
 Guard Dog \_\_\_\_\_  
 Gift (for whom) \_\_\_\_\_

Who will be primarily responsible for the care of the dog? \_\_\_\_\_

Who will be financially responsible for the dog? \_\_\_\_\_

Where will this dog live primarily?  Indoor only  Mostly Indoor  Mostly Outdoor  Outdoor only

Where will your new dog sleep at night? \_\_\_\_\_

In what areas of the house will the dog be allowed? \_\_\_\_\_

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How many hours per day (on average will the dog be alone? \_\_\_\_\_

Will you be tethering or chaining the dog outside for any length of time?  Yes  No

Will you provide monthly heartworm prevention to your new dog?  Yes  No

Which of the following situations would lead you to rehome your newly adopted pet (select all that apply)?

- |                          |                                   |                          |  |
|--------------------------|-----------------------------------|--------------------------|--|
| <input type="checkbox"/> | Moving (no pets allowed)          | <input type="checkbox"/> | Allergies  |
| <input type="checkbox"/> | Sheds too much                    | <input type="checkbox"/> | Getting a divorce or married                         |
| <input type="checkbox"/> | Having a baby                     | <input type="checkbox"/> | Grew too big   |
| <input type="checkbox"/> | Finished school/ moving back home | <input type="checkbox"/> | Digging/ Chewing                                     |
| <input type="checkbox"/> | Ruins the furniture               | <input type="checkbox"/> | Improper urination/defecation                        |
| <input type="checkbox"/> | Children will no longer care for  | <input type="checkbox"/> | Other _____  |
| <input type="checkbox"/> | Too expensive/ medical bills      | <input type="checkbox"/> | I would not re-home my pet unless circumstances      |
| <input type="checkbox"/> | Behavioral problem(s)             |                          | beyond my control dictate that I must, in which case |
|                          |                                   |                          | I agree to return the pet to HSDC                    |

Please supply any additional information about you that you think we should know, the more information we have about you and your family and situation, the better!

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**Personal Reference**

Please list a non-relative who is familiar with you and your pets, and notify them that a foster parent may be contacting them in about two weeks.

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

Phone number: \_\_\_\_\_

Is it okay to text?  Yes  No

Relationship to you: \_\_\_\_\_

## Agreement

### Please read the following:

- 1) Submission of an adoption application does not guarantee you will be approved to adopt a pet.
- 2) Approval is determined based on review of your application, results of the home check, and the overall suitability of you and your home to your animal of interest.
- 3) Many factors determine which applicant will be matched with a particular pet. If you are not able to adopt the pet of your choosing today, it does not mean that you are not considered a good pet owner or that your home is not acceptable. Our goal is to place all animals into homes that will best suit their individual needs. Please ask for clarification if you have any questions.
- 4) For “high demand” animals who received multiple applications in a short amount of time, applications are considered in the order they are received. We do our best to respond to each and every application in a timely manner, and to inform all applicants once an animal has been placed. Please understand that if the animal of your choice is adopted by another applicant, it does not necessarily mean you were denied or your application was looked over. If you have interest in any of our other available adoptable pets or you would like to be notified of future available pets, please let us know! As someone who has already submitted an application, you will be placed at the top of the list for any animal which enters the program that meets the criteria you set forth.

### PLEASE INITIAL THE FOLLOWING

- I understand that HSDC has the right to demand return of the animal if the adopter does not comply with any of the following provisions and/or if HSDC determines the pet’s needs are not being met adequately \_\_\_\_\_
- I hereby agree that the animal is being adopted by me solely as a pet for myself and/or my immediate family \_\_\_\_\_
- I agree that I will not sell, give away or otherwise dispose of said animal to any person(s), dealer, retailer, auction, institute or any other entity for any reason. If at a later date I am unable or unwilling to keep this pet, I agree to surrender the pet to HSDC \_\_\_\_\_
- I hereby agree to care for the pet in a humane and responsible manner and to provide it with clean and adequate shelter, food, water, affection, preventative flea/tick/heartworm treatment, and annual physical examination and vaccinations under the supervision of a licensed Veterinarian, as well as annual physical examination by a licensed Veterinarian \_\_\_\_\_
- I agree that the pet will reside in my home as an indoor pet and shall not be allowed to roam freely \_\_\_\_\_
- I will notify HSDC of any change of contact information for the adopter (address, phone number, email address) in a timely manner \_\_\_\_\_
- In the event the animal becomes lost, stolen or dies, I will immediately notify HSDC \_\_\_\_\_

- I understand that HSDC makes no representations or guarantees concerning the breed, health, condition, training, behavior, or temperament of the animal. I also understand and agree that HSDC further gives no guarantees, expressed or implied, of the suitability of the animal to the adopter and/or his family \_\_\_\_\_
- I agree to hold the Humane Society of Davidson County harmless to the risk of being bitten, scratched, or injured, and to any damages to my property caused by this adopted animal \_\_\_\_\_
- If I am unable to comply with any of the medical needs of the animal, I will contact HSDC immediately. If I cannot provide proper veterinary care HSDC reserves the right to reclaim the animal \_\_\_\_\_
- The animal will not undergo any cosmetic veterinary procedures including but not limited to declawing, tail docking, ear cropping, and debarking. Permitted and prohibited procedures are at the sole discretion of HSDC \_\_\_\_\_
- I agree to

I have completed this application truthfully and fully understand the adoption process.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_