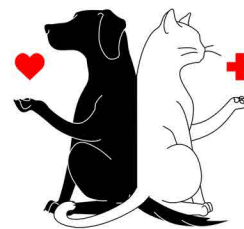




# DOG ADOPTION APPLICATION



Applicant Name \_\_\_\_\_ Co-Applicant Name \_\_\_\_\_  
Street Address \_\_\_\_\_ City, State, ZIP \_\_\_\_\_  
Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_  
Email \_\_\_\_\_ Employer \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Today's Date \_\_\_\_\_

Are all adults in agreement about the adoption? Yes ☐ No ☐  
If no, why? \_\_\_\_\_

Do you own or rent your current residence? Own ☐ Rent ☐  
What type of residence? House ☐ Apartment ☐ Mobile Home ☐ Duplex/Condo ☐  
Does the landlord allow pets? Yes ☐ No ☐ Is a pet deposit required? Yes ☐ No ☐  
How much is the pet deposit? \$ \_\_\_\_\_ Is there a size or weight limit? Yes ☐ No ☐  
Is the pet deposit paid? Yes ☐ No ☐ Is the deposit per pet ☐ household ☐  
Name of apartment complex or landlord \_\_\_\_\_  
Complex or landlord phone number(s) \_\_\_\_\_  
How long have you lived at your current residence? \_\_\_\_\_  
If you had to move, what would you do with your pets? \_\_\_\_\_  
Are you or the co-applicant a student? Yes ☐ No ☐ If Yes: Full Time ☐ Part Time ☐  
Do you or the co-app travel frequently? Yes ☐ No ☐ If Yes, how often? \_\_\_\_\_  
Where would your pet stay while you are out of town? \_\_\_\_\_  
How many people live in your household? \_\_\_\_\_ Ages of any children \_\_\_\_\_  
Do you have a fenced yard? Yes ☐ No ☐ What type of fence & height? \_\_\_\_\_  
Where will this pet be kept? Totally indoors \_\_\_\_\_ Mostly indoors \_\_\_\_\_  
Mostly outdoors \_\_\_\_\_ Totally outdoors \_\_\_\_\_

Explain \_\_\_\_\_  
How long will this pet be left home alone during the day? # hours \_\_\_\_\_ # days \_\_\_\_\_  
Where will this pet be kept while you are at work or away from home? (check all that apply)  
Loose indoors \_\_\_\_\_ Garage \_\_\_\_\_ Outside kennel or dog run \_\_\_\_\_ Crated indoors \_\_\_\_\_  
Loose outdoors \_\_\_\_\_ Tied Up outdoors \_\_\_\_\_ Basement \_\_\_\_\_ Created outdoors \_\_\_\_\_ Other \_\_\_\_\_  
Explain \_\_\_\_\_

Where will this pet sleep at night? (check all that apply)  
Loose indoors \_\_\_\_\_ Garage \_\_\_\_\_ Outside kennel or dog run \_\_\_\_\_ Crated indoors \_\_\_\_\_  
Loose outdoors \_\_\_\_\_ Tied Up outdoors \_\_\_\_\_ Basement \_\_\_\_\_ Created outdoors \_\_\_\_\_  
In bed with owner \_\_\_\_\_ Other \_\_\_\_\_  
Explain \_\_\_\_\_

Why do you want to adopt a dog at this time? (check all that apply)  
House pet \_\_\_\_\_ Guard dog \_\_\_\_\_ Watch dog \_\_\_\_\_ Gift \_\_\_\_\_  
Jogging partner \_\_\_\_\_ Companion for child \_\_\_\_\_ Companion for pet \_\_\_\_\_ Other \_\_\_\_\_  
Explain \_\_\_\_\_

Are you aware dogs are diggers, escape artists, heavy shedders, and may not be cat friendly? Yes ☐ No ☐  
Have you ever owned a dog? Yes ☐ No ☐  
What traits are you looking for in a dog (active, lazy, kid friendly, cat friendly agility, etc.)? Be specific so we can find a dog that best fits your lifestyle. \_\_\_\_\_

Do you currently own any cats? Yes ☐ No ☐ If yes, how many? \_\_\_\_\_  
Which of our dogs are you interested in? \_\_\_\_\_

## VETERINARIAN INFORMATION

Office name \_\_\_\_\_ Phone number \_\_\_\_\_  
Address \_\_\_\_\_  
Doctor's name \_\_\_\_\_

### YOUR CURRENTLY AND PREVIOUSLY OWNED PETS

Please list **every** animal (dogs, cats, etc.) you have owned in the last 5 years.

Pet name \_\_\_\_\_ Breed / species \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_

How long have you owned this pet? \_\_\_\_\_

Spayed or neutered? Yes ☐ No ☐ If no, explain \_\_\_\_\_

On Heartworm prevention? Yes ☐ No ☐ If no, explain \_\_\_\_\_

Fully vaccinated? Yes ☐ No ☐ If no, explain \_\_\_\_\_

Do you still own this pet? Yes ☐ No ☐ If no, explain \_\_\_\_\_

Pet name \_\_\_\_\_ Breed / species \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_

How long have you owned this pet? \_\_\_\_\_

Spayed or neutered? Yes ☐ No ☐ If no, explain \_\_\_\_\_

On Heartworm prevention? Yes ☐ No ☐ If no, explain \_\_\_\_\_

Fully vaccinated? Yes ☐ No ☐ If no, explain \_\_\_\_\_

Do you still own this pet? Yes ☐ No ☐ If no, explain \_\_\_\_\_

Pet name \_\_\_\_\_ Breed / species \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_

How long have you owned this pet? \_\_\_\_\_

Spayed or neutered? Yes ☐ No ☐ If no, explain \_\_\_\_\_

On Heartworm prevention? Yes ☐ No ☐ If no, explain \_\_\_\_\_

Fully vaccinated? Yes ☐ No ☐ If no, explain \_\_\_\_\_

Do you still own this pet? Yes ☐ No ☐ If no, explain \_\_\_\_\_

Pet name \_\_\_\_\_ Breed / species \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_

How long have you owned this pet? \_\_\_\_\_

Spayed or neutered? Yes ☐ No ☐ If no, explain \_\_\_\_\_

On Heartworm prevention? Yes ☐ No ☐ If no, explain \_\_\_\_\_

Fully vaccinated? Yes ☐ No ☐ If no, explain \_\_\_\_\_

Do you still own this pet? Yes ☐ No ☐ If no, explain \_\_\_\_\_

Pet name \_\_\_\_\_ Breed / species \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_

How long have you owned this pet? \_\_\_\_\_

Spayed or neutered? Yes ☐ No ☐ If no, explain \_\_\_\_\_

On Heartworm prevention? Yes ☐ No ☐ If no, explain \_\_\_\_\_

Fully vaccinated? Yes ☐ No ☐ If no, explain \_\_\_\_\_

Do you still own this pet? Yes ☐ No ☐ If no, explain \_\_\_\_\_

Comments or notes?

By signing this form, I/we acknowledge that all the information on this form is true and correct. I/we understand that any misrepresentation of fact may result in the Friends of Arlington Animal Services (FAAS) refusing adoption privileges to me/us. If my/our request for adoption is approved and later the Friends of Arlington Animal Services (FAAS) discovers the above information is not true or correct, the Friends of Arlington Animal Services (FAAS) reserves the right to remove the adopted dog from my home.

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

Co-Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_