



Wythe County Animal Control

ADOPTION APPLICATION

It will take up to 72 hours to process your application. We will not process this application unless it is COMPLETE! You will only be called if you are approved. We will not return calls to persons not approved!

Date _____

Specific Animal's Name You're Interested in (optional) _____

Applicant Name _____

Co-applicant's Name _____ Co-applicant's Relationship *spouse, roommate, etc.* _____

Street Address _____ Apt # _____ City _____ State _____ Zip _____

Driver's License # _____ State of Issue _____ Birthdate __/__/__

Home Phone _____ Work Phone _____ Cell Phone _____

E-mail Address _____

Primary reason you want to adopt? FAMILY GIFT PROTECTION HUNTING

Check all that apply: I HAVE A JOB AM A HOMEMAKER AM A STUDENT

If you are a student, what is your current year of enrollment? _____

Check all sources of income: SELF CO-APPLICANT RETIREMENT GOVERNMENT PROGRAM

How many adults live in your household? _____ How many children? _____ How old are the children? _____

Please tell us about the children's experience with pets: _____

Is anyone in your household allergic to dogs? _____

Do you RENT or OWN?

Do you live in a HOUSE APARTMENT TOWNHOME MOBILE HOME OTHER: _____?

How long have you lived at your present address? _____

IF YOU RENT, WE WILL NEED TO CONTACT YOUR LANDLORD OR MANAGEMENT COMPANY

Please provide their name and telephone number _____

Please list ALL pets owned currently

please include animal type, breeds, age if living circle male or female and yes or no neutered/spayed.

- | | | | | |
|-----------------------|-------------|-----------|-------|-----------------------|
| 1.) Cat / Dog / Other | Breed _____ | Age _____ | M / F | Neutered/Spayed Y / N |
| 2.) Cat / Dog / Other | Breed _____ | Age _____ | M / F | Neutered/Spayed Y / N |
| 3.) Cat / Dog / Other | Breed _____ | Age _____ | M / F | Neutered/Spayed Y / N |
| 4.) Cat / Dog / Other | Breed _____ | Age _____ | M / F | Neutered/Spayed Y / N |
| 5.) Cat / Dog / Other | Breed _____ | Age _____ | M / F | Neutered/Spayed Y / N |

Please list ALL pets owned in the past 15 years:

please include animal type, breeds, age if living, male or female and spayed or neutered.

Please list Veterinarians with phone numbers for living or deceased pets in the last 10 years:

Out of town application will not be processed without phone numbers!

Are all pets up to date on vaccinations? _____

Have you ever had to give up a pet? _____

If yes, why? Where did you take it? _____

Have you ever lost a pet to illness or injury? _____

If yes, please explain: _____

Where would your new pet be kept during the day?

Where would it sleep at night?

How long would the animal be left alone each day?

How and where would it be confined?

How often?

Do you have a yard? Y / N

If yes, is it fenced? Y / N If yes, height _____ construction _____ attached to home Y / N size _____

If no, how would you manage elimination, exercise/playtime?

How would your new pet be cared for during overnight absences or vacations?

Are you prepared to spend \$400-\$600 a year on your new companion? _____

Under what circumstances would you consider giving up your pet? Check all that apply:

- Chewing Barking Digging Housebreaking issues
- Jumping/Climbing out of enclosure or running away Moving
- Shedding Allergies Jumping on furniture Medical Expenses/Illness
- Aggressive toward pets/ family members Other: _____

Please include a reference (not a family member):

Name: _____ Phone Number: _____

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I am willing and financially able to make the necessary financial commitment to care for a pet by providing veterinary care, including routine vaccinations and proper nutrition, for the life of the pet. YES NO

I authorize a vet reference to be obtained by Wythe County Animal Shelter? YES NO

I understand that a pet can live 15 years or longer. After giving very careful thought and consideration to all the responsibilities of pet ownership and my future lifestyle commitments, I would be able to care for a pet for its entire lifespan. YES NO

I am fully prepared to make the commitment of time to care for a pet by providing training, regular exercise, grooming, and human interaction for the life of the pet. YES NO

If for any reason you can no longer care for this animal you must contact Wythe County Animal Shelter FIRST.

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By signing, I hereby state that I have never been convicted of animal cruelty, neglect, or abandonment of any animal or animals.

I certify that the above information is correct, and I understand that the Wythe County Animal Control has the right to verify this information.

APPLICANT SIGNATURE _____

DATE _____

Please bring your completed application to our office at the shelter or send it to shelter@wytheco.org

ELECTRONIC SUBMISSION OF THIS APPLICATION WILL SERVE AS SIGNATURE