



PO Box 149
Montclair, New Jersey 07042
(973) 746-5212

DOG PRE-ADOPTION APPLICATION

Thank you for your interest in a PAWS canine!

SECTION ONE

Name: _____

Address: _____

City: State: Zip: _____

Length of time lived at this address? _____

Home phone: _____ Work phone: _____

Occupation? _____ Name of Employer? _____

Email Address: _____

May we contact you via e-mail? Yes ___ No ___

Is your dwelling a (circle one) : house apartment condo townhouse co-op

Do you own or rent? If rent, does your landlord allow you to have a dog? _____

If you have a condo or coop, do the bylaws permit pets? _____

Number of children living in household? _____ Ages? _____

Number of adults living in household? _____

Do you own any other cats, dogs, reptiles or other domestic animals? If yes, explain:

If you currently own a pet, do you know how it gets along with dogs?

Have you ever adopted an animal from our shelter? _____

Are you seeking a specific breed? _____ If yes, what breed? _____

Reason for wanting a dog: Watchdog ___ Companion ___ Hunter ___ Breeder ___ House
Pet ___ Other _____

Please describe the perfect dog for you. What characteristics are you looking for? As you answer this, please think about your lifestyle - are you active, in and out a lot, are there lots of people/children around, etc., or are you more sedentary, quiet, with few visitors? What

personality in a dog would best fit your family's needs and lifestyle? Would your dog go with you everywhere or stay at home most of the time?

END OF SECTION ONE

SECTION TWO

Are you aware if you have any allergies to dog fur? _____

How would you exercise your dog? Walk on leash? ____ fenced yard ? _____

chained to house? _____ chained in yard? _____

Should you become unable to care for your dog, who would assume responsibility for it?

Pet History:

Please include all current pets, including caged or barnyard animals and/or guard dogs.

| <u>Name</u> | <u>Age</u> | <u>Sex</u> | <u>Spayed/Neutered</u> | <u>Kept In/Out</u> | <u>How long owned?</u> | <u>Dog/cat/other</u> |
|-------------|------------|------------|------------------------|--------------------|------------------------|----------------------|
| _____ | ____ | ____ | _____ | _____ | _____ | _____ |
| _____ | ____ | ____ | _____ | _____ | _____ | _____ |
| _____ | ____ | ____ | _____ | _____ | _____ | _____ |
| _____ | ____ | ____ | _____ | _____ | _____ | _____ |

List pets previously owned in the past 5 years (other than those listed above)

| <u>Name</u> | <u>Age</u> | <u>Sex</u> | <u>Spayed/Neutered</u> | <u>Kept In/Out</u> | <u>How long owned?</u> | <u>Dog/cat/other</u> |
|-------------|------------|------------|------------------------|--------------------|------------------------|----------------------|
| _____ | ____ | ____ | _____ | _____ | _____ | _____ |
| _____ | ____ | ____ | _____ | _____ | _____ | _____ |
| _____ | ____ | ____ | _____ | _____ | _____ | _____ |
| _____ | ____ | ____ | _____ | _____ | _____ | _____ |

Have you ever had to surrender your animal to a shelter? ____ Abandon on the street? _____

Have you ever had to give away a dog or euthanize a dog for behavioral issues (please explain the circumstances)? _____

For any other reason? _____

How many hours per day would the dog be alone? _____

If you rent, we require written landlord consent to bring animals onto property. Please provide name, address and phone of landlord below. A copy of your lease and written consent of your landlord will be required prior to adoption of any PAWS animal.

Do you have a fenced-in yard or fenced area attached to your house?: Yes No

Does the fence connect on all four sides? Yes or No? _____

Are you aware of any disturbances outside your yard that could distract the dog while he is out? (such as a neighbor's dog or cat, loose dogs on street, mischievous children, neighbors who don't like animals, theft of animals in the neighborhood, high traffic)? Please list these things - we just want you and us to be aware of them:

Please tell us about all people an adoptive animal would usually come in contact with, including your spouse, roommates, children, neighborhood children, grandchildren, friends, relatives, etc.:

Name Age Relationship to you Frequency of Visits to Home

Do your neighbors have a dog or other pet? Yes No

If so, what species? _____ Also, if they have a dog or other pet, is there a fenced-in area for the pet? Yes No

Where would your dog stay during the day? _____ Sleep at night? _____

Where would your dog stay during the day when you are NOT home? _____

What is your expectation regarding a shelter dog's obedience training level? Completely trained Somewhat trained Untrained okay

Who is your veterinarian (name/address/telephone)? If you do not yet have a veterinarian, who do you plan on using? _____

Please list the names of two references. References should have a strong feeling for what you are like as a person and as a potential dog owner and should NOT be related to nor reside with you.

1. Name _____ Association _____ Phone: _____

2. Name _____ Association _____ Phone: _____

The basic needs of a healthy dog (feeding, well-dog vet visits, etc.) can cost approximately \$800-\$1,000 per year. Any health or behavioral problems with the dog could increase this amount. You need to anticipate that the dog could need emergency surgery, or you might want to take the dog to additional training classes, etc. and this cost is something you need to be ready for. Does this financial responsibility present a problem? No Yes

Under what circumstances would you have to return the dog to PAWS?

- Moving
- Change in schedule
- Marriage to somebody who doesn't like your dog
- Divorce
- New Baby
- Current pets don't like new rescue dog
- Illness
- Other (please specify): _____

Have you applied anywhere else within the past year to adopt an animal?

No Yes (where and when?) _____

Was your application approved? Yes No If not, why not? _____

How did you hear about PAWS? _____

By submitting this application I am certifying that I am at least 21 years of age and intend to be the legal owner and the person responsible for the care and well-being of any dog that I may be approved to adopt from PAWS. In submitting this application, I hereby authorize the release and/or phone inquiry to PAWS of all veterinary records for any and all animals I currently own or have owned in the past. I also authorize PAWS to contact my references and/or neighbors regarding my suitability for adopting a dog. I certify that all the information in this application is true and I understand that false information could void this application and my chance for adoption from PAWS. In the interest of placing its animals in suitable homes, PAWS reserves the right to refuse adoption to anyone and completion of this application does not guarantee any right to adopt from PAWS.

Signature: _____

Date: _____