



DOG ADOPTION APPLICATION

Dog's Name _____

Thank you for visiting Collier Animal Rescue!

Hold #1 #2 #3 Until _____

IN ORDER TO BE CONSIDERED AS AN ADOPTER TODAY, YOU MUST:

- *Be 18 yrs of age or older. *Have ID showing your present address. *Have the knowledge and consent of your landlord.
 - *Be able and willing to spend the time and money necessary to provide training, medical treatment, and proper care for a pet.
- Collier Animal Rescue reserves the right to refuse adoption to anyone.**

NAME _____ DATE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

HOME PHONE _____ WORK PHONE _____ CELL PHONE _____

DRIVERS LICENSE # _____ STATE _____

EMAIL ADDRESS: _____

Secondary contact information should your dog become lost: Name _____ Phone# _____

- Do you currently live in a: House Apartment Condo Mobile Home Other _____
- Please list the name and phone # of landlord, President and/or manager of any homeowner, condo or other similar associations, apartment or park manager: Name _____ Phone# _____
- If you own your home we must verify that you are the owner with the County Property Appraiser's office. What is the name of the owner on County records of the house you live in: _____ Phone# _____
- Your current pets must be up-to-date on vaccinations. Can we call your veterinarian to confirm vaccinations? YES NO
Name _____ Dog/Cat? _____ Male/Female? _____ Spayed/Neutered? _____ When was last vaccination given? _____ How long have you owned this pet? _____

5. Who is your Veterinarian or Vet Clinic? _____

6. Have you ever surrendered an animal to a shelter or animal control facility? No Yes, Why? _____

7. What other animals have you owned in the past? _____

8. How many adults live in household? _____ Children? _____ Ages of children _____

9. Does anyone in your household have known allergies to animals? Yes No

If yes, please explain _____

10. Where will pet be kept when left alone? _____ For how long? _____

11. Are you willing to care for this animal for the rest of its life? Yes No (Dogs can live 10-15 years or more)

12. If you move or relocate, do you promise to find a place that allows dogs? YES NO, Why not? _____

13. Are you familiar with Heartworm and the necessary preventative medications? Yes No

14. Do you want the dog for (check all that apply): Companion Breeder Gift Watchdog Hunting Dog

Company For Other Pet Other _____

15. If adopting a puppy, how do you plan on housetraining him? _____

16. Did you know all dogs must be confined or leashed at all times in Florida? Yes No, but now I do.

17. What will you do if your dog chews furniture or shows other destructive behavior? _____

18. How will you keep your dog confined to your property? (check all that apply): In House Kennel Fenced Yard

Patio Garage On Leash Loose on Property Other _____

19. Is everyone living in your household aware that you would like to adopt this dog? Yes No, It's a surprise.

20. Have you ever had an animal you owned confiscated by any animal control or humane organization? Yes No

PLEASE READ AND SIGN BELOW

I certify the above information is accurate and complete to the best of my knowledge. I understand that Collier Animal Rescue has the right to reclaim the animal if any given information is found to be false. I authorize the release of veterinarian information related to current and past pets. This application is the property of Collier Animal Rescue.

X _____ Date: _____

FOR SHELTER USE ONLY . THANK YOU.

If applicant is not the owner of the house according to Property Appraiser, was Landlord called and approved YES NO Initials: _____

Veterinary Reference YES NO Initials: _____

Initials of person accepting application: _____