



HUMANE SOCIETY

RICHLAND COUNTY

3025 PARK AVENUE WEST • ONTARIO, OH 44906 • WWW.ADOPTOURSTRAYS.COM

FOR STAFF USE ONLY

Approved (Date) _____ Initial _____

Denied (Date) _____ Initial _____

Adoption Application/Contract

***Incomplete applications will NOT be accepted. Those applications without veterinary and/or landlord contact information (if applicable will NOT be accepted) ***

***Please understand that your answers to these questions help us determine the **best** homes for our animals. By applying for the adoption of a shelter animal, you hereby give your veterinarian(s) and other references permission to disclose pertinent information to the Humane Society of Richland County. ***

Today's Date _____

Animal Information:

Pets Name: _____

Color /Description: _____ Species: _____ Breed: _____

Personal Information:

Names(s)

(1) _____

(2) _____

Address: _____

City _____ State _____ County _____ Zip _____

Home Phone Number: _____ - _____ - _____ Cell Phone _____ - _____ - _____

E-mail _____

Occupation _____ Employer _____

How long Employed? _____ Work Phone _____ - _____ - _____

Driver's License # _____ D.O.B _____

Personal Reference

****A personal reference is anyone who does not live in the same household as the adopter****

Name _____ Relation _____

Address: _____

City: _____ State _____ Phone _____ - _____ - _____

E-mail _____ Years Acquainted _____



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Household Information

Do you: Own _____ Rent _____ Live with Parents _____

If you Rent or Live with Parents:

Landlords/Parents Names _____

Landlords/Parents Address _____

Landlords/Parents Phone Number _____-_____-_____

If you rent, does your landlord allow pets? YES or NO

Is your landlord aware that you are looking for a new pet? YES or NO

****We MUST be able to contact your landlord/parents for permission to keep a pet BEFORE an application can be approved! ****

Do you have a yard? YES or NO If yes, is it fenced? YES or NO

Please list the ages of ALL other adults AND children in the home _____

Do you have consent of all other adults in the home? YES or NO

Do you own any other animals? YES or NO

Are they spayed/neutered? YES or NO

If NO, please explain: _____

Are they primarily kept indoors or outdoors? _____

Are your pets up to date on their vaccines and monthly preventatives? YES or NO

Are your pets permitted to run loose in the house? YES or NO

Veterinarian Information

Who is your current Veterinarian? _____

Address: _____

Phone: _____-_____-_____

Please list the names and phone numbers of any other veterinarian you've used in the past:



PLEASE LIST ALL PETS YOU'VE OWNED IN THE PAST 5 YEARS

(1) Species _____ Breed _____

Where did you obtain this animal? _____

Do you still own this animal? YES or NO

If NO- Reason: _____

If YES- How long have you owned this animal? _____

Is the animal SPAYED/NEUTERED? YES or NO

Is this animal an INDOOR or OUTDOOR companion? _____

Up to date and current on vaccines? YES or NO

(2) Species _____ Breed _____

Where did you obtain this animal? _____

Do you still own this animal? YES or NO

If NO- Reason: _____

If YES- How long have you owned this animal? _____

Is the animal SPAYED/NEUTERED? YES or NO

Is this animal an INDOOR or OUTDOOR companion? _____

Up to date and current on vaccines? YES or NO

(3) Species _____ Breed _____

Where did you obtain this animal? _____

Do you still own this animal? YES or NO

If NO- Reason: _____

If YES- How long have you owned this animal? _____

Is the animal SPAYED/NEUTERED? YES or NO

Is this animal an INDOOR or OUTDOOR companion? _____

Up to date and current on vaccines? YES or NO



Where will this animal spend most of each day? _____

Will this animal be kept primarily indoors? YES or NO

On a regular day, how many hours will the animal be left alone? _____

Do you have a contingency plan to pay for unexpected emergency vet bills? YES or NO

How soon do you want to adopt? _____

Have you adopted from an animal rescue agency or shelter before? YES or NO

How did you hear about us? _____

PLEASE READ CAREFULLY AND INITIAL

Health Statement: *I understand that all the animals adopted from the Humane Society of Richland County are examined for disease, spayed/neutered and vaccinated appropriately for their age. They are free from infection to the best knowledge of the staff at the Humane Society of Richland County. However, I accept that they may be harboring viral or bacterial infections unknown to the staff at the Humane Society of Richland County. _____ (please initial)*

Financial and Physical: *I hereby testify that I am financially and physically able to care for this animal. I understand that proper food, veterinary care, bedding, toys, crate and so on, can be costly and I am able to meet these requirements. I further testify that I am physically fit to provide all the necessary activities with my new pet. _____ (please initial)*

Truthfulness: *I hereby testify that the information that I've given is true to the best of my knowledge. I understand that if the information contained herein is found to be false, my application can be refused or said adopted (or fostered) animal shall be relinquished to the Humane Society of Richland County **WITHOUT** a refund of adoption fee. _____ (please initial)*

Adoption Fee Statement: *I understand that the adoption fee is **NON-REFUNDABLE**, and the animal is to be returned to the Humane Society of Richland County, if I can no longer care for him/her properly. I also understand that **abandonment of ANY animal is illegal under the Ohio Revised Code.** _____ (please initial)*

I agree that any animal that I adopt from the Humane Society of Richland County will be a primarily indoor companion, and will not be chained or restrained outside for extended lengths of time. _____ (please initial)

THE HUMANE SOCIETY OF RICHLAND COUNTY RESERVES THE RIGHT TO DENY ANY APPLICATION, AT ANY TIME, FOR ANY REASON, AT THE DISCRETION OF THE SHELTER STAFF.



Dog Adoptions Only

PLEASE READ CAREFULLY AND SIGN

Please understand that the dogs we have at our shelter have come from abuse/neglect/abandonment cases.

This means that your new pet is likely to have some underlying issues as a result from their bad start at life. The majority of dogs just need to know that they are loved, and be given the chance to trust humans again. There are some cases in which you may feel the need to return the dog to our shelter due to issues. We ask that, if this situation should arise, that you try a few options first. One being to try and work with the dog yourselves.

Love, patience, and consistency will go a very long way. If this doesn't work, or isn't possible, we ask that you seek a professional to assist you in dog training. We can provide you with some dog training facilities that we have worked with in the past and have had great success with.

Shelter dogs are not always "ready-made" dogs. They have had a very tough start, and deserve to be shown that they are worth fighting for. By signing below, you agree to be fully responsible for your newly adopted dog/puppy, and agree to exhaust all options as far as obedience, and/or specific professional dog training, **before** contacting us about returning your new dog.

IN THE EVENT THAT YOU HAVE EXHAUSTED ALL OTHER OPTIONS AND DO NEED TO RETURN THE DOG TO OUR SHELTER, WE REQUIRE AT LEAST A 2 WEEK NOTICE BEFORE YOU RETURN THE DOG TO US. THIS GIVES US TIME TO MAKE ARRANGEMENTS SO THAT WE WILL HAVE A CAGE AVAILABLE.

Signature of Applicant _____ Date _____

HEALTH AGREEMENT CONTRACT

I understand that The Humane Society of Richland County has no veterinarian on staff and that said animal is free from infection to the best knowledge of the staff. However, I accept that the animal may be harboring viral and or bacterial infections unknown to the staff.

I acknowledge that if the animal becomes ill, I have two options available to me.

- The first option being that the animal is returned to The Humane Society of Richland County where it will be up to the shelter's discretion if and how the animal will be treated. You may also contact the shelter to determine further action. HSRC may suggest taking the animal to Phillips Animal Hospital for assessment and or treatment.
- The second option is that I will take the animal to the veterinarian of my choice and incur ALL expenses that arise from said illness after which I will still be contractually obligated to keep my appointment to have the animal sterilized and pay the adoption fee.

If you choose to have the animal sterilized at your own vet, at your own expense, you must make this known to the shelter staff and it must be approved. **You will be required to provide documentation of the sterilization within 90 days or we will ask that the animal be returned to the shelter.**

By signing below you are stating that you agree to these terms and conditions.

Signature of Applicant _____ Date _____



Thank you for applying to adopt with us. Please be advised that a copy of your application will stay on file with us at The Humane Society of Richland County, whether your application is approved or denied. Below are some of the key points to remember on your application that you have signed, and agreed too.

- You have signed a binding contract that states that alteration (spay/neuter) of ALL animals adopted from our shelter is absolutely MANDATORY. **No Exceptions!**
- You have signed a binding contract that states you DO have consent of all other adults in the home to bring a new animal in.
- You have signed a binding contract that the animal you are applying to adopt will be an indoor companion. We DO NOT adopt our animals out to be outdoor companions.
- You have signed a binding contract that although the animal you are applying to adopt is free from infection and disease to the best knowledge of the staff at The Humane Society of Richland County, you accept that the animal may be harboring viral or bacterial infections unknown to the staff.
- You have signed a binding contract that if said animal DOES become sick within the foster period (if applicable) that you have two options: The first being that you can take the animal to your own vet in which you, personally, will incur ALL expenses that arise from said illness. The second being that you can return the animal to The Humane Society of Richland county where it will be up to the shelter staff's discretion if and how the animal will be treated.
- You have signed a binding contract that you are financially and physically able to care for this animal. Any and all health concerns after the adoption of this animal is complete, the Humane Society of Richland County is not responsible for.
- You have signed a binding contract that any and all information you have put on your application, or given to a staff member is true to the best of your knowledge. I further understand that if any information is found to be false, your application will be refused and said adopted (or fostered) animal shall be relinquished to the Humane Society of Richland County WITHOUT further notice.
- You have signed a binding contract that you understand that the adoption fee (in part or whole) and/or foster fee is NON-REFUNDABLE.
- You have signed a binding contract that if you are no longer able to care for this animal properly, that the animal is to be returned to The Humane Society of Richland County, providing you call us 2 weeks in advance, so that we are able to make arrangements and have a cage available to the animal. NO EXCEPTIONS.**
- You have signed a binding contract that if you are applying to adopt a dog, several things need to be noted.
 - 1) You understand that the dogs we have at our shelter have come from abuse/neglect/abandonment cases, and that it is likely that the dog has some underlying issues as a result from their bad start at life. You have agreed to give this animal love, patience, and be consistent with the animal.
 - 2) You have agreed that if you are unable to work with the dog yourself, you are willing to enlist the help of a professional trainer, and that if you need assistance in finding a facility to train the dog, The Humane Society of Richland County will gladly help put you in contact with some facilities.
 - 3) You agree to be FULLY RESPONSIBLE for your newly adopted dog/puppy. Please understand that dogs can build up a tremendous amount of anxiety, which can lead to destructive behaviors, such as chewing, etc.. Please note that to a dog/puppy, a nice couch, mattress, expensive laptops, cords, etc... can often look like big chew toys to them. Please keep your new dog contained either in a crate or in a room when you are not there to supervise them, in order to prevent destructive behaviors. It is important to remember that if you do not want the dog to get into, or chew certain things up, you must not allow the dog to have access to these things.

Signature of Applicant _____ Date _____



STAFF NOTES

A large, empty rectangular box with a thin black border, intended for staff notes.