

20. If deceased, cause of death? _____

21. If these problems should occur how do you plan on correcting them?

Chewing: _____

Scratching/clawing: _____

Digging: _____

Barking: _____

House breaking: _____

22. If you are adopting a cat would you consider declawing? _____

23. Who will be responsible for the care of this pet? _____

24. **Who is your Vet?** Name of Business _____

Name of Vet _____ # _____

25. Pets can live for 10 – 20 yrs., what is your plan for this pet if you move or are unable to care for it? _____

26. In your opinion, what makes someone a good and responsible pet owner? _____

27. Please provide three references with **NAME, ADDRESS, TELEPHONE # Please do not use references that live in the household with you or family members.**

Reference 1: _____

Reference 2: _____

Reference 3: _____

Please provide name and phone number for your closest neighbor (non-relative)

Best phone number to reach you at concerning your application. _____

I hereby declare that all of the information I have provided in this interview is true to the best of my knowledge. I understand that the process of interview does not, in itself make me eligible for adoption. I also understand that the officers have no obligation to continue the adoption process any further and may decline my application for adoption for any reason.

Signature: _____ **Date:** _____

Print Name: _____