



Name of cat _____
Color of cat _____
Microchip ID# _____
Sex: _____ Age: _____
Date: _____

## CAT ADOPTION APPLICATION

### INCOMPLETE APPLICATIONS WILL NOT BE REVIEWED

Applicant's Names (include spouse) \_\_\_\_\_

Address (include Apt. #) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email (include spouse) \_\_\_\_\_

Occupations of ALL applicants \_\_\_\_\_

Employers for ALL applicants \_\_\_\_\_

For Military Applicants – Branch and Command \_\_\_\_\_

### DESCRIPTION OF RESIDENCE

Rental (base housing) \_\_\_\_\_ Owned \_\_\_\_\_ Type of Residence: House \_\_\_\_\_ Townhome \_\_\_\_\_ Condo/Apt \_\_\_\_\_

If you rent, landlord/owner's name (required): \_\_\_\_\_ Phone \_\_\_\_\_

How long have you lived there? \_\_\_\_\_ How long have you lived in Hawaii? \_\_\_\_\_

Who lives in this household? Include ages and relationships of all occupants including children.

### PETS

What cats or dogs do you currently own? Are they sterilized and current on shots? Please list.

What cats or dogs have you owned previously as an adult and where are they now? (not family pets growing up). Please list.

Where will the cat live? Inside? \_\_\_\_\_ outside? \_\_\_\_\_ both? \_\_\_\_\_

What happens if you must leave suddenly or travel? Who will care for the cat?

What are some situations in which you feel you might surrender this cat? What other pets have you surrendered in the past and why?

If you plan to move out of state, will you take your pets with you? Have you researched costs to travel with a pet?

What will you do if your cat shows destructive behavior? (urinating, scratching, tearing up plants/furniture, etc)?

Cats often live longer than 10 years. Are you committed to providing a forever home for this cat?

By signing this adoption application, I agree that:

**I will NOT surrender or rehome this cat. I will contact PDP and return the cat to the PetSmart store where the cat was adopted at.**

**I will not declaw this cat – an inhumane and unnecessary amputation procedure that causes long-term irreversible pain and suffering and increases veterinary costs.**

**I am 21 years of age or older and I am able to provide proof upon request.**

**If I have omitted or provided misleading or inaccurate information, my application will be denied and any adoption rescinded.**

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature