



**STAFF USE ONLY:**

- 1) Stray Application: Y / N
- 2) Application # \_\_\_\_\_
- 3) Stray Hold Release Date \_\_\_\_\_
- 4) Callback made: \_\_\_\_\_

Checks to Complete?	Date/Time	Initials	Notes/Comments
Identity/Address			
Landlord Approved			
Veterinary or Personal Reference			
Verified name is NOT on DNA/Vet Concerns list			
Family met & OK w/ pet			
Pets met/OK w/ new pet			

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In order to adopt a pet, you must be 18 years of age, have the knowledge and consent of all adults living in your household, have a valid I.D. with proof of current address, and understand that all applications must be reviewed and approved by TAPS before an adoption can take place. Further the approval can include a 24-48 hours waiting period to allow for a veterinary check, address verification, and/or a home visit before approval can be given.

*\*How did you hear about TAPS?*  
 Walk-In  Newspaper  HOI/Best Friends Friday  Previous Adoption  Other \_\_\_\_\_

**I. PERSONAL / HOME RELATED INFORMATION:**

NAME: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_  
 STREET ADDRESS: \_\_\_\_\_ WORK/CELL PHONE: \_\_\_\_\_  
 CITY: \_\_\_\_\_ County: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 DRIVER'S LICENSE #: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_  
 EMPLOYER: \_\_\_\_\_ LENGTH OF EMPLOYMENT: \_\_\_\_\_

- 1) Your living arrangements:  own  rent  live w/parents  house  condo  duplex  apartment  
 Landlord's name: \_\_\_\_\_ Landlords Tel # \_\_\_\_\_
- 2) Number of adults in household: \_\_\_\_\_ # of children: \_\_\_\_\_ Ages of children: \_\_\_\_\_
- 3) Are there any adults/children that visit your home on a regular basis?  Yes  No  
 - If Yes, please indicate ages? \_\_\_\_\_
- 3) Does anyone in the home or those who visit frequently, have allergies?  Yes  No  
 - If Yes, types of allergies? \_\_\_\_\_
- 4) Do you plan to move in the near future?  Yes  No  
 If you do move (at some time), what will you do with your pets? \_\_\_\_\_
- 5) Pets can live well over 15 years and require a significant commitment of time, finances, and emotion. Are you prepared to make this depth of a commitment at this time?  Yes  No
- 6) I am adopting this pet for a:  Family Companion  Gift

**II. ANIMAL / PET RELATED INFORMATION:**

1) Who will primarily be responsible for the care (feeding, grooming, exercising) of your pet?  
 \_\_\_\_\_

2) How many pets do you have now? Dogs \_\_\_\_\_ Cats \_\_\_\_\_ Other \_\_\_\_\_

3) Please list any pets you now have, or have had in the past 5 years:

Name	Type/Breed	Age	Sex	Altered	How Long Owned	Why you no longer have

4) Who is your Veterinarian, Veterinary Clinic, or one you have used in the past?

Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

5) If you do not have a veterinary reference, please give (2) personal references:

NAME:	ADDRESS (Incl. City/State/Zip):	Phone:
		( )
		( )

6) Please answer the following questions on all current or previous pets (which can be verified)

	YES	NO	Not Necessary	Do not Believe In
Spayed/Neutered?				
Current on Rabies?				
Current on Other Vaccinations?				
Current on Heartworm Prevention?				

**III. GENERAL QUESTIONS:**

1) Are you interested in adopting a: CAT DOG BOTH

2) Where will the Pet be Kept? (Please indicate with "X" where appropriate)

	Loose in House	Crate	Basement	Outside	Other / Explain
During the day:					
During the evening:					
Where will the Pet Sleep:					
While at Work:					

3) What brand of pet food do you currently feed your pet fed? \_\_\_\_\_

4) It may take several weeks or even months for this pet to adjust to a new home, are you willing to commit the time and energy it will require to help this pet adjust?  Yes  No

**IV. IF INTERESTED IN ADOPTING A DOG...**

1) Do you have a fenced in yard?  Yes  No

If Yes... how high is the fence? \_\_\_\_\_

2) If No, How will the dog go outside?

Leash Walk  Tie Out  Zip Line  Roam Free  Underground Fence  Other \_\_\_\_\_

3) How / Where do you plan on Exercising the Dog? \_\_\_\_\_

4) Will you provide Obedience Training?  Yes  No ~If Yes, who/how/where \_\_\_\_\_

5) Will you provide Crate Training?  Yes  No

6) How do you plan on Housebreaking your dog? \_\_\_\_\_

**V. IF YOU ARE INTERESTED IN ADOPTING A CAT....**

1) Are you planning to declaw?  Yes  No ~If Yes, how many claws?  Front feet  All Four feet

2) Are you planning to let the cat outside?  Yes  No ~If Yes,  On a leash  In back yard  Roam Free

Please explain: \_\_\_\_\_

My signature constitutes that the information provided on this application is true, accurate and complete to the best of my knowledge. I understand that any misrepresentations of facts may result in my losing all adoption privileges. I authorize investigation of any and all statements in this application.

I recognize that TAPS maintains the right to refuse any adoption when deemed in the best interest of the animal and completing this application does not guarantee the adoption of a pet.

I, the undersigned along with those persons accompanying me assume any risk of injury, which may be incurred as a result of viewing an animal in the custody of TAPS.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Spouse / Housemate

\_\_\_\_\_  
Date

