

DOG



CAT

ANIMAL ADOPTION APPLICATION

Name: _____ PrimaryPhone _____ Secondary: _____

Address: _____

Date of Birth: _____ Ga. Driver's License No.: _____ Expiration: _____

1. Do you own _____ rent _____? How long at current address? _____

If you rent, name and phone number of landlord? _____
(Written permission from realtor / manager may be required in order to complete the adoption process.)

2. Do you live in a house _____ apartment _____ other _____?

3. Do you have children? Yes _____ No _____ If yes, what are their ages? _____
(PLEASE NOTE: We recommend that families with children under the age of six adopt a dog or cat that is at least four months old.)

4. Do you own any pets now or have you owned any pets in the last two years? Yes _____ No _____
If yes, please list how long you have had them, and, where they are now. _____

5. What is your reason for adopting this animal? _____ My companionship _____ Gift _____ Hunting _____
Family companionship _____ Watchdog _____ Mouser _____

6. Is your yard fenced on all sides? Yes _____ No _____
How will you confine and exercise this animal? _____

7. Where will this animal sleep? _____

8. Is anyone home during the day? Yes _____ No _____

9. If applying for a cat, will you have the cat declawed? Yes _____ No _____

10. If you move, what will you do with this animal?

11. Would you allow a home visit by a representative of P.C.A.C? Yes _____ No _____

12. Explain why you would or would not spay / neuter this animal.

13. Where did you hear about the adoption program?

14. Veterinarian's Name: _____ Clinic Address: _____
Phone Number (include area code): _____

I certify that the above information is true and accurate to the best of my knowledge and that falsification of information can be cause for denial of my application.

Signature of Applicant: _____ Date: _____

Application received by: _____ Title: _____

Comments: _____
