



## SMALL ANIMAL ADOPTION APPLICATION

- Please fill out the following application carefully and completely. This information will help us make the best placement possible – our goal is to find a loving and responsible home for the animals in our care.

### To adopt a pet from HSSC:

- Must be 18 years of age to qualify to adopt
- All pets currently in your home **MUST** be spayed or neutered and visited a veterinarian in the past year
- Please bring all household members to meet Humane Society animals prior to adopting
- **Understand that we reserve the right to deny the adoption for any reason**
- Applications must be submitted for review

**TODAY'S DATE:** \_\_\_\_\_

**Pet Name:** \_\_\_\_\_ **Species:** \_\_\_\_\_

### PLEASE TELL US ABOUT YOUR HOUSEHOLD

**Name(1):** \_\_\_\_\_ **Birth date:** \_\_\_\_\_

**Name(2):** \_\_\_\_\_ **Birth date:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Primary Phone:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Do you own or rent your home:** \_\_\_\_\_ **How long at this address:** \_\_\_\_\_

**Landlord Name & Phone** \_\_\_\_\_

**Have you spoken to your landlord about getting a new pet?** \_\_\_\_\_

### **Your Household consists of: (Circle all that Apply)**

Live Alone    Adults Only    Seniors 60+    Children in home? Yes    No    Ages: \_\_\_\_\_

**Activity in your home is: (Circle)**    Quiet    Active    Hectic

**Does any member of your family have allergies to animals?** \_\_\_\_\_

**Are you planning to move any time soon?**    Yes    No

**If you move, what will you do with the pet?** \_\_\_\_\_

**Would you object to an unannounced home visit by a representative of our organization?**    Yes    No

**Have you ever adopted from The Humane Society of Sandusky County before?**    Yes    No

**If yes, where is that pet now?** \_\_\_\_\_

**Have you ever surrendered a pet to a shelter/Humane Society?**    Yes    No

**If yes, please explain the circumstances:** \_\_\_\_\_ **When:** \_\_\_\_\_

**PLEASE TELL US ABOUT YOUR PET HISTORY**

How many pets have you owned in the last five years? \_\_\_\_\_

If you have owned previously, where is the pet now? \_\_\_\_\_

If you have given a pet away in the past, please explain reason for doing so: \_\_\_\_\_

Has a pet ever died on your premises of disease or unknown causes? Yes No

If yes, please explain \_\_\_\_\_

**Companion animals currently in your household:**

Name/Breed	Spayed/Neutered	Indoor/Outdoor	Time owned	Age
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Name of your veterinarian:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

Please circle one: **First-time pet owner** **Had pets when growing up** **Have pet(s) now**

**Reason for adopting:** \_\_\_\_\_ **Where will you keep your pet?** \_\_\_\_\_

**Time at home: (Circle)** Rarely (sleep there only) At home when not at work Home all day (Someone is there)

**How many hours per day will your pet spend alone:** Weekdays \_\_\_\_\_ Weekends \_\_\_\_\_

List any behavior problems you consider NOT acceptable: \_\_\_\_\_

What would you do if you could no longer care for this pet? \_\_\_\_\_

What steps have you taken to learn about this species of pet ownership in general? \_\_\_\_\_

All pets making the transition into a new home need time to adjust and may require houstraining and behavior training. They can shed, make noise, and need lots of attention. Are you aware of and willing to accommodate these potential issues and needs? Yes No

How much do you anticipate spending on veterinary care for this pet per year? \_\_\_\_\_

How much do you anticipate spending on food, litter, treats/toys, grooming, etc. for this pet per month? \_\_\_\_\_

Therefore, are you prepared to provide and pay for any necessary medical treatment that may occur in the future?  
Yes No

I understand that The Humane Society of Sandusky County is not responsible for medical care of this pet after 48 hours of leaving the shelter.

By signing below, you are indicating that you have read and answered every question truthfully and are aware that any false answers will be grounds for immediate rejection. You also give The Humane Society permission to contact your landlord and veterinarian. Also, please be aware that our adoption fees are non-refundable.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

SHOULD YOUR ADOPTION BE APPROVED, **YOU MUST PROVIDE A PET CARRIER TO TAKE YOUR NEW PET HOME!**