

## **Dog Adoption Application**

(PLEASE CIRCLE ANSWERS WHERE APPLICABLE)

TODAY'S DATE:								
SHELTER NAME	OF ANIMA	AL:			CASE NO.:			
NAME OF APPL	ICANT (pri	nt clearly):			AGE:			
COMPLETE ADD	ORESS:							
CITY:			_			POSTAL:		
HOME PHONE:						CELL PHONE:		
EMAIL ADDRES	S:							
Preferred Met	thod of Co	ontact:	EMAI	r 🗀 c	ELL	<b>НОМЕ</b>		
HOUSING:	Rent o	r Own	TYP	E: House	Condo	Apartment Farm C	Other	
Landlord's Nam	ne:					Phone No:		REQUIRED
,	with you in	n the home.) <mark>T</mark>	<mark>hey mu</mark>	<mark>st sign ackno</mark>	wledgi	nclude yourself? (Please  ng they agree with pote	ntial adoption if ove	er 18.
NAME:						Signature:		
NAME:					AGE:	Signature:		
NAME:				<del></del>	AGE:	Signature:		
NAME:				<del></del>	AGE:	Signature:		
Please list any p	oets living v	with you:						
Dog/Cat	Age	Male or Fe	Male or Female		Up to date on core vaccinations?		Length of Ownership	Indoor or Outdoor
Please list all pr	revious pet	s, length of ov	vnershi	p and reason	for ter	mination of ownership:		
Type of Animal: (Cat, Dog etc.)  Length of Ownership:		_	Reason: (Death, rehoming, lost etc.)				Explanation:	

1.	Why do you want to adopt this dog?							
2.	Have you met this dog in person?							
3.	How would you describe your living environment: Calm & Quiet Not Too Hectic Very Busy							
4.	Energy level desired: Low (lap dog) Medium (playful) High (active)							
5.	What activities do you plan to do with your new pet?							
6.	If applicable, how do you think your current pets will react to a new animal?							
7.	How do you plan to introduce your resident pets to a new dog?							
8.	Do you or anyone living with you have asthma or allergies? Yes OR No							
	a. If no, have you been around an animal long enough to know that allergies are not present:							
	b. If yes, how do you plan to combat this issue:							
9.	If Applicable, how are your children/grandchildren/nieces or nephews with animals?							
10.	Have you adopted from the Estevan Humane Society in the past? Yes OR No							
11.	Have you ever been denied an adoption in the past, (this organization or any other)? Yes OR No							
	a. If yes, please explain why:							
12.	Have you ever had to rehome a pet? Yes OR No							
	a. What was the reason?							
13.	Will this pet be an: Indoor pet Outdoor pet Indoor and Outdoor pet							
	a. If indoor/outdoor, please explain: (i.e. Only outside for short periods to go to bathroom, outside all day when away							
	from home, etc.)							
14.	Is your yard fenced? Yes OR No							
	a. Height of fence: Less than 4ft 5ft 6ft 10ft or Higher Fully enclosed area (size?)							
	b. If no fencing, explain plans for toilet and exercise needs?							
15.	Average length of time this pet will be alone? <b>0-4hrs 4-8hrs 8-12hrs 12hrs+</b>							
	a. How do you plan to keep your pet while away from home?							
16.	If your dog developed a behavior or obedience problem (i.e. jumping, biting, barking), how would you respond? (i.e. Training,							
	obedience school, kenneling, rehome, etc.)							
17.	We cannot guarantee temperament or health of the animal. If an issue arises post adoption, how do you plan to handle the							
	situation? (Undiagnosed fear aggression, illness, injury, etc)							
18.	Are there any deal breaker traits/unacceptable behaviours you will not tolerate in your new pet?							
	9. Do you plan to keep up with vaccinations?							
20.	If you plan on relocating or leaving for a vacation, what will you do with your pet?							
21.	Do you plan to spay/neuter your pet should they be underage at time of adoption? YES or NO							
	a. If no, why?							

Some points to consider, please initial all points:

- A dog's lifespan can be up to 15 years or more, ensure you are able to care for it for many years.
- Daily pet expenses can average \$500 a year, is this something you can maintain?
- Walking, feeding, grooming, obedience training and playtime for a dog are huge time commitments, are you able to take on the extra needs of a pet?
- The City of Estevan Bylaw states **NO** domestic animal shall be allowed to run at large and must be under the control of the owner, are you able to maintain this?
- The City of Estevan's Bylaw states only 3 animals per household. Please understand this will be a factor in granting you approval if you have 3 pets currently.
- If this pet is intact, you must ensure a spay or neuter is completed when age appropriate. (Female and Male dogs reach sexual maturity at 6 months and can be sterilized)

## Multiple applicants for the same animal at the Estevan Humane Society will be reviewed and carefully considered.

The decision will be based on what is best for the individual animal, considering their needs based on behaviour, personality and health. We want the best possible placement to ensure a healthy and happy pet that will be well adjusted and comfortable in their new home. The Estevan Humane Society is entitled to ask further questions if needed and to check my residence to ensure accommodations are suitable for the pet. It is up to the discretion of the Estevan Humane Society to approve or deny any application for adoption.

Please list <mark>two <u>n</u></mark>	<mark>on-relative</mark> references for	r referral and phone nu	mber (MUST BE OVER 18):					
Name:								
Name:		Phone:						
Your veterinariar	n (if you have other pets):		Phone:					
	option: 14 day trial perion check this box if you wish	• • •	•	ay or brought back to the shelter				
any false or inco	mplete statement is prop	er grounds for adoptio	n denial.	nowledge. I am fully aware that				
Applicant's Nam	e (print clearly):		<del></del>					
Applicant's Signa	ature:							
Dated on:								
Staff Witness:								
*PLEASE NOTE*		· · · · · · · · · · · · · · · · · · ·	personnel to approve adoption pplication to be processed, can	ns. If applying on a weekend, pleason take up to 3 days*				
Office Use Only	<u>y:</u>							
Application:	Approved	Denied	Initials					
References:	Approved	☐ Denied	Initials					
Adoption:	Approved	Denied	Initials					