

PEN _____	#A _____	Employee: _____
<input type="checkbox"/> Pending Landlord	<input type="checkbox"/> Pending home dog	Other _____

Adoption Survey

Date _____ Your Township/Borough _____

Name _____

Address _____

City _____ County _____ State _____ Zip _____

Home Phone (____) _____ Work Phone (____) _____

Driver's License # _____ - _____ - _____ Email _____

Employer _____ Spouse's Employer _____

Alternate contact information (friend or family member outside of the household) for Microchip registration.

Name _____ Phone (____) _____

1. How many live in your household? Adults (18+) _____ Children _____

2. How old are the children? _____

(Please check)

3. Do all adults in the residence know you plan to adopt? Yes No

4. Is it possible for all household residents to meet this pet before adoption? Yes No

5. Does anyone living in the household have any known allergies to pets? Yes No

6. Please Check: Rent Own Live with parents

7. I live in: House Townhouse Apartment Mobile Home Group Home

8. If you rent, what will you do with this pet when you need to move? _____

9. Are you a college student? Yes No

10. Have you worked with this shelter before (adopted/surrendered)? Yes No

11. Looking to adopt: Cat Dog Other: _____

12. What do you think it will cost to care for this animal for the next year? (Food, shelter, vet care)

Under \$100 \$100-300 \$300-500 \$500-700 \$700-1000 Over \$1000

13. Who will be your veterinarian? _____

14. Are you prepared to take this animal to your veterinarian for a complete examination within 7 days?

Yes No

15. Do you agree to have this animal spayed or neutered?

Yes No

16. Do you understand the local ordinances for licensing and leashing?

Yes No

17. The pets I've owned in the last five years:

Name	Species/Breed	Where is pet kept	Age	Spay/Neuter	Sex	What happened to pet
				Yes No		
				Yes No		
				Yes No		
				Yes No		
				Yes No		
				Yes No		
				Yes No		
				Yes No		

18. Do you understand that the Lycoming County SPCA makes no representations or guarantees of the temperament and health of any animal from this shelter?

Yes No

19. Do you understand that the Lycoming County SPCA is in no way liable for any future injury or damage caused by this animal?

Yes No

Signature _____

If you rent, you will need to provide your landlord's signature and phone number.

This section is to be filled out by **landlord only**.

In addition to your signature we will need to call you and verify your approval.

Name _____

Date _____

Signature _____

Best time to call? _____

Home Phone _____

Second Phone _____

Dog Adoption

1. Who will be responsible for this pet? _____
2. How many hours will this animal spend without human companionship? _____
3. Where will this pet be during the day? Inside Outside Inside or outside kennel
4. Where will this pet be during the night? Inside Outside Inside or outside kennel
5. Who will care for this pet in your absence? (Vacation, illness) _____
6. Who will be feeding/watering this dog? _____
7. Who will be walking this dog in the morning and night? _____
8. Why did you decide on this particular animal? _____

9. What problems do you think you will have when you take this dog home? _____

10. Do you have a fenced in yard? Yes No Type _____ Height _____
11. How will you keep your dog confined on your property?
 In house Kenneled Fenced yard Tied out Patio Garage
12. What do you want this dog for?
 House pet Company for other pet Gift
 Companion Breeding Guard dog Other
13. Do you realize you may have to house train this new puppy or dog? Yes No
14. Are you familiar with crate training? Yes No
15. Would you like information on crate training or house training? Yes No
16. Do you plan on taking your dog to obedience training? Yes No
17. What will you do if this dog or puppy shows destructive behavior? _____

18. What do you know about this breed? _____
19. Have you owned this breed before? _____