



# Longview Animal Care & Adoption Center Dog Adoption Application

Landlord Info:	
Yes _____	No _____

Application for (dog name): \_\_\_\_\_ Animal #: \_\_\_\_\_

First Name:	Last Name:
Address:	City:                      State:                      Zip:
Cell phone:	Home phone:
Date of Birth:	Email:
Alternative contact for microchip:	

Veterinarian: \_\_\_\_\_ Phone: \_\_\_\_\_

Do you live in: House  Apartment  Condo  Duplex  Farm/Acreage

Do you rent or own your own home? Own  Rent  Live with parents  Other Family member

Please tell us about the people currently residing in your household:

Adults: How many? \_\_\_\_\_ Ages \_\_\_\_\_ Children: How many? \_\_\_\_\_ Ages \_\_\_\_\_

Have the children in the home lived with dogs before? Yes  No

How many times have you moved in the last 5 years? \_\_\_\_\_

Please tell us about all the animals in the past 10 years you've owned:

Dog/Cat	Age	Breed	M/F?	Altered?	How long owned?	Still Own?	If no, Why?
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N			
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N			
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N			
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N			
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N			

1. Number of dogs owned as a    Child \_\_\_\_\_    Adult \_\_\_\_\_
2. All dogs making the transition from a shelter to a new home need time to adjust to a new family and other pets and may require housetraining and behavior training. Are you willing to provide any needed training Yes  No  Are you experienced in resolving issues? Yes  No
3. Are you willing to care for this dog for its entire life which may be 15+ years Yes  No  Maybe
4. Who will take primary responsibility for the dog i.e. takes to the vet, provide food/water etc.? \_\_\_\_\_
5. Will you be able to take this dog to the vet within 30 days?    Yes     No
6. Where will you keep this dog? (Check ALL that apply) Inside Dog  Outside Dog  Inside/Outside Dog  Other (Please explain) \_\_\_\_\_ Where will the dog be kept during the day? \_\_\_\_\_ At night? \_\_\_\_\_ Do you have a fenced yard Yes  No  How high \_\_\_\_\_ Ft
7. Roughly how many hours will the dog be in the home alone? \_\_\_\_\_

8. When left alone do you plan on crating the dog Yes  No  If no, how/where will you leave the dog? \_\_\_\_\_
9. Have you ever had a pet: Run away  Get hit by a car  Die in your care? (other than of old age)  Kept as an outdoor only pet?  If so, please explain: \_\_\_\_\_
10. Have you ever: Given/sold an animal to other person  Given an animal to a rescue or other animal welfare society (please list the organization(s) \_\_\_\_\_  
If so, why? \_\_\_\_\_
11. How much do you think you'll spend yearly for the care of the dog? (Food, medical care, boarding, toys, etc)  
Less than \$100  \$100-\$500  \$500-\$1000  More
12. Are you willing and able to pay for emergency treatment which maybe \$200-\$1000 or more Yes  No
13. Will your dog be in the presence of children frequently? Yes  No  What ages? \_\_\_\_\_
14. How would you describe the activity level of your home? Low  Moderate  High
15. Dogs need daily exercise, a bored dog can cause behavioral problems such as barking, chewing and digging, how many times a day and for how long do you expect to exercise this dog: i.e. once a day for 30 mins  
\_\_\_\_\_
16. What are some reasons you would relinquish this dog back to the Shelter e.g. human aggression, animal aggression, incurable elimination problems, excessive chewing, separation anxiety, moving, having a baby, cannot afford any longer: \_\_\_\_\_
17. How would you handle barking? \_\_\_\_\_
18. How would you handle house soiling? \_\_\_\_\_
19. Are you anticipating any major changes in your lifestyle in the next six months (i.e. new baby, moving, new career, new roommate or spouse) \_\_\_\_\_
20. For what potential problems do you feel unprepared? (Please check all that apply)
- House soiling  Not good with children
- Not good with other animals  Excessive Vocalization  Medical Issues
- Grooming needs  Other:  \_\_\_\_\_
19. Does anyone in your house have any known allergies to animals or asthma, Yes  No  If yes, to what?  
\_\_\_\_\_
- Is there anything else you'd like to discuss about adopting this dog? Yes  No  If yes, please explain what? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Adopting a dog is a serious responsibility. A dog you adopt today will likely be part of your family for the next 10 to 20 years. A dog makes considerable demands on your time and resources. As a dog owner, you will need to spend time training, socializing, grooming, feeding, scooping poop, exercising and playing with your dog on a daily basis. Dogs that have not been trained require even more time and socialization. All dogs require regular medical care. Some dogs require special food or medications. Some dogs require regular professional grooming. Vet bills, pet sitting, and vacation boarding fees may add considerable expense to your family budget. Are you prepared to accept the personal and financial needs of owning a dog and accept that Longview Animal Care & Adoption Center makes no guarantees as to the health or temperament of this dog? Yes  No

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Date

Staff name:

Landlord Approval Yes  No  Pending