

MIDDLESEX COUNTY ANIMAL SHELTER
2840 GENERAL PULLER HWY.
SALUDA, VA. 23149
PHONE (804) 758-2779
FAX (804) 758-5293

ANIMAL ADOPTION APPLICATION

Completion of this application does not guarantee adoption of a Middlesex County Animal Shelter animal

Name of Applicant _____

Occupation _____

Name of Spouse/Significant other _____

Occupation _____

Street Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email Address _____

Do you live in a House _____ Apartment _____ Condominium _____ Town House _____ Other _____

Do you Own _____ Rent _____ If you rent, do you have your landlords permission to have a pet? Yes _____ No _____

Landlords Name and Phone Number _____

Where will the dog be when left alone? _____

Will the dog live _____ Indoors _____ Outdoors _____ in and out

If outdoors will the dog stay in a fenced yard or kennel _____ tied up _____ running free _____

Do you have a fenced yard? Yes _____ No _____ if so, how high is the fence? _____

Do you have a pool? Yes _____ No _____ if so, is it fenced separately from the yard? Yes _____ No _____

Why do you want a dog? (Check all that apply)

_____ House pet _____ Companion for family

_____ Companion for other pet _____ Companion for children

_____ Protection for home/family _____ Protection for business

_____ Outdoor Watchdog _____ As a gift

Other (specify) _____

Other pets (specify number of each): Dogs _____ Cats _____ Other _____

If you have any dogs or cats, are they spayed/neutered? Yes _____ No _____

What Pets have you had in the past? _____

What happened to the ones you no longer have? _____

What would happen to the dog if you move? _____

Do you have a regular veterinarian? Yes _____ No _____ if so, Vet's name _____

Name of Clinic _____ Tel Number _____

How would you train this dog? (Check all that apply)

_____ Obedience School _____ Positive reinforcement _____ Punishment if dog fails

_____ Firm verbal commands _____ Clicker/hand signals

Other (specify)

Under what circumstances would you not be able to keep this dog? _____

By signing this application, I do also agree that Middlesex county animal shelter may call my veterinarian and may also come and do a home inspection.

Signature _____ Date _____

Middlesex County Animal Shelter reserves the right to refuse adoption to any Client for any reason. This questionnaire becomes part of our contract.

Approved

By _____ **Date** _____

Disapproved