Adoption Application

Where the Love Is, Inc.

2676 Whitney Avenue

Hamden, CT 06518

To help ensure the best possible placement of our rescued animals, and in order to determine that the proposed adoption is in the best interest of the animal, as well as you and your family, please complete each of the following questions. Please be as thorough as possible. Where the Love Is, Inc. reserves the right to refuse adoption to any applicant.

**Name of Animal You Wish to Adopt:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Spouse’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State: \_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place of Employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Personal Reference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Household Information:**

1. Do you live in a: House \_\_\_\_ Apartment \_\_\_\_ Condo \_\_\_\_\_

2. Do you: Own \_\_\_\_\_Rent \_\_\_\_\_ Live at Home \_\_\_\_\_

1. If you rent, Landlord’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Landlord Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Length of time at current residence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 If less than 1 year, please provide previous address:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Do you have a fenced-in yard? Yes \_\_\_\_\_ No \_\_\_\_\_How high? \_\_\_\_\_\_\_\_\_\_

 If you do not have a fenced yard, what arrangements do you plan to make for exercise

 and toilet duties: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Number of Adults in home: \_\_\_\_\_\_

 Number/Ages of Children:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Are all family members aware that you are considering adopting a pet?

 Yes\_\_\_\_ No\_\_\_\_\_ Do they all approve? Yes\_\_\_\_\_ No \_\_\_\_\_

**Pet Information:**

1. Will there be someone home with your pet during the day? Yes\_\_\_\_ No\_\_\_\_

2. How many hours will the pet spend alone daily/nightly? # Hours: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Where will the pet spend most of its time? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Would you accept an animal that has a treatable medical condition? Yes\_\_\_ No\_\_\_\_

**Pet History:**

1. Do you own other pets? Yes \_\_\_\_\_ No\_\_\_\_\_ Total number of animals: \_\_\_\_

2. Are they current on their vaccinations? Yes\_\_\_\_\_ No\_\_\_\_\_

3. Are your dogs on Heartworm preventatives? Yes\_\_\_\_\_ No\_\_\_\_\_

4. Have you had other pets in the last five years? Yes\_\_\_\_\_ No\_\_\_\_\_

5. What happened to them? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Have you ever given up a pet for adoption? Yes \_\_\_\_ No \_\_\_\_\_

7. If yes, please explain the circumstances: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Have you ever surrendered an animal to an Animal Shelter? Yes \_\_\_\_\_\_ No \_\_\_\_\_\_\_

**Veterinarian Information**:

1. Name of current veterinarian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Name & location of Animal Hospital: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. How much do you think this pet will cost you each year (including food, heart worm/flea control, medical/dental care, supplies, training, grooming, toys, etc.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***I certify that the information given on this application is true and correct. I am responsible for providing proper shelter, food, water, exercise, medical care and humane treatment at all times for my companion animal. I am aware that there is an adoption fee for this animal, and it includes first set of shots and spay/ neuter. If I am approved by Where the Love Is, Inc. to adopt an animal, I agree to all requirements.***

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