



PET ADOPTION APPLICATION rev 7/2016

Please be aware the adoption of a new pet is a 10 to 15 year commitment and may cost more than \$1,000 dollars per year to care for.

Name of Pet you wish to Adopt: _____

Your Name: _____ **Email:** _____

Home Phone: _____ **Cell #:** _____

Home Address: _____

City: _____ State: _____ Zip: _____

Do you Rent or Own? _____ Please circle: Apartment, House, Condo, Mobile Home

If renting, what is your Landlord's name? _____

Landlord's Phone Number: _____ **Email:** _____

Have you received permission to have a pet from your landlord? _____

How many children in your home? _____ Age _____

Are there any others residing in your home? Please List: _____

Employer Name: _____ **Phone#:** _____

Email _____ **Employer address:** _____

City: _____ State: _____ Zip: _____

How long have you been there _____ **Position:** _____

Reference: (Not a Relative) Name: _____

Phone # _____ Email _____

Do you plan to keep your pet INSIDE AT ALL TIMES, UNLESS IN A CARRIER FOR TRANSPORT, or for dogs being walked outside with their owners? (Please Initial)_____

How many hours are you away from home during the average work day?_____

What kind of other pets do you have in the home? Please list all pets' names, breed/ ages. _____

Are they spayed/neutered? _____

Are they Up to Date on all routine shots? _____

Are they on Heart Worm Prevention? _____

Your Veterinarian's Name: _____

City: _____ Phone #: _____

Email Address: _____

Are there any other comments you would like to make?

I, (name) _____ certify that all information provided on this form is true and accurate. I give permission to Florida Pets Alive Inc. to verify all of this information and to make a home visit prior to the adoption of a pet being approved.

Signature: _____ Date: _____