

4. If you have animals now or had them in the past, who is (was) your veterinarian? _____
 _____ Phone (____) _____
5. What inoculations/treatments has your animal had in the past year? _____

6. When was your animal's last visit to a veterinarian? _____ Reason _____

7. If you move in the future, what will you do with your animal(s)? _____
8. a. Are you aware that in the first year regular preventative medical attention may cost \$150 for an adult dog or cat
 and \$200 for a puppy or kitten? _____
- b. Are you aware that in the first year food, pet supplies, and obedience training may cost \$150 for a dog and \$100
 for a cat? _____
- c. Are you aware that a dog can live 15 years and a cat can live 20 years? _____
9. Do any members of your household have allergies? Yes _____ No _____
 Who and what kind(s)? _____
10. Do you have a fenced yard? If yes, how is it fenced? _____

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1. This animal will be alone (without human companionship) for about _____ hours per day _____ days per week.
 2. Where will the animal be kept:
 When you are home _____ When no one is home _____
 3. Do you plan to let your animal exercise outdoors? Yes _____ No _____ How often? _____
 4. Do you understand that state laws and/or local ordinances require vaccinating, leashing, licensing, and altering of
 companion animals? _____ Do you agree to do these things? _____
 5. How will you train your animal to:
 Stay off furniture/tables? _____

 Not chew plants or other items? _____

 Not scratch furniture? _____

 6. What will you do if your animal:
 Urinates in the house (dog) or outside of the litter pan (cat)? _____

 Keeps you awake at night? _____

 Gets sick or injured? _____
 7. What type of identification do you plan to place on your animal? _____
 8. Do you feel that female domestic animals should be spayed? _____
 9. Do you feel that male domestic animals should be neutered? _____

10. Do you plan to let your animal have kittens or puppies? Yes _____ No _____
If yes, why? _____

11. Do you understand that pet overpopulation is a serious problem? _____

12. It may take your animal two weeks (or longer if other animals are involved) to adjust to its new homes. Are you prepared to allow this much time to adjust? Yes _____ No _____
How will you help your animal adjust to its new home? _____

13. How did you learn about the Washington Humane Society Animal Shelter?
Advertiser _____ Friend _____ Veterinarian _____ Other (specify) _____

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By signing below, I certify that the information I have given is true and that I recognize that any misrepresentation of facts may result in my losing the privilege of adopting or keeping an adopted animal. I understand that the Washington Humane Society Animal Shelter has the right to deny my request to adopt an animal, and I authorize investigation of all statements in this application. I understand that this application is the property of the Washington Humane Society Animal Shelter.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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FOR OFFICE USE ONLY

Applicant interviewed Date _____ By _____

Adoption approval Yes / No If no, why? _____

Can condition be corrected? _____ How? _____

Landowner's approval Yes / No If no, why? _____

Landowner's contact name _____

Date notified _____ By _____

Impound _____ Prior Warnings _____ Reclaims _____

Other comments _____

Please understand that there are specific policies on holding animals.