

Application Form

Name: _____ Date: _____

Address: _____ Home Phone: _____

City, State, Zip: _____ Cell Phone: _____

Email Address: _____ Place Of Employment _____

Work Phone: _____

If Leasing, Complex/Landlord Name & Phone: _____

1. How long have you lived at the above address? _____

2. Check one for your current housing: House ___ Apartment ___ Mobile Home ___
Condo ___

Do you? Own ___ Rent ___ Pets Accepted ___ Weight Limit _____

Deposit Paid? _____ Amount of Deposit _____ Do you foresee moving in the near
future? _____

3. How many people live in your household? Adults _____ Children _____ Ages of
children _____

4. Do all members know that you plan to adopt a pet? Yes ___ No ___

5. Are you and/or your spouse currently employed? Yes ___ No ___

6. Are you 21 years of age or older? Yes ___ No ___

7. Do you smoke? Yes ___ No ___ In home _____ Outside _____

8. Do you live with your parents or relatives? Yes ___ No ___

9. Does anyone have pet allergies? Yes ___ No ___ If yes, what
kind? _____

10. For whom are you interested in adopting? Self ___ Family ___ Someone else ___

11. Why do you want a pet? Companion for self ___ Companion for other pet ___ Gift ___ Childs
pet ___

Family pet ___ Yard pet ___ Guard dog ___ Watch dog ___ Hunting ___

12. Is being housebroken required? Yes ___ No ___

13. Do you currently have any pets? Yes ___ No ___ Type of pet _____ Sex, age, &
breed _____

14. Have you had any pets in the past five years? Yes___ No___ How many_____

Where are they
now? _____

15. Has a cat or dog died on your premises in the last three months from FIP, FIV, FELV,
Distemper, Parvo, or unknown causes? Yes___ No___ What did he/she die
from? _____

16. Where do your present pets live? Indoors___ Outdoors___

17. Where will your new pet live? Indoors___ Outdoors___

18. Where will your new pet sleep? Indoors___ Outdoors___ Basement___ Garage___

19. How will your new pet be exercised? Walking___ Running___ Runner chain___

20. Are gates secured by locks? Yes___ No___

21. Is there a completely fenced yard available? Yes___ No___

22. How high is the fence? _____ What kind of
fence? _____

23. Are your present pets up to date on their shots, and spayed or neutered? Yes___ No___

24. Do you object to spaying or neutering? Yes___ No___

25. Vet or Veterinary clinic name & phone
number _____

26. What do you think **annual preventative** veterinary care for a pet would
cost? _____

27. What do you plan to do with your pet when you go on
vacation? _____

28. What procedures will you use for destructive
behavior? _____

29. What would you use for flea and tick
prevention? _____

30. What would you use for Heartworm
prevention? _____

31. May an authorized Forgotten K9s Inc. representative inspect the premises where the animal
will be kept both

before, and after adoption? Yes___ No___

32. What brand of pet food do you plan to feed your new
pet? _____

33. Have you ever taken a pet to a shelter before? Yes___ No___ How many_____

Why? _____

Personal reference: Name, address,
phone _____

Please note: Forgotten K9s Inc. is an independent, non-profit organization. We will in no way be held responsible for any adult, minor child, and/or their property during the viewing process. In signing this form, you attest that you agree to release Forgotten K9s Inc. and its representatives from all liability for any property in your party while in the adoption area.

I attest that the above information is
accurate: _____
Your Signature