WELCOME TO KEOKUK ANIMAL SERVICES

CAT ADOPTION APPLICATION FORM

As the city department for the prevention of cruelty to animals, the Keokuk Animal Services has assumed responsibility for the welfare of every animal that enters its facility.

Our purpose is to place an animal in a responsible home where it will receive veterinary care when needed, and where it will be controlled so as not to become a free roaming animal, or add to the surplus of animals already in the community.

To insure these ends, we have formulated this application form to assist our staff in the careful selection of home placement for our animals available for adoption. Only those persons who are adults of legal age and who complete a satisfactory application will be eligible to adopt pets from the facility. WE RESERVE THE RIGHT TO REFUSE ANY ADOPTION.

SECTION I

DATE__________________________________

In order to be considered for an adoption today you must: (1) Be 18 years of age. (2) Have the knowledge and consent of all adults living in your household. (3) Have a valid ID with current address. (4) Have landowner’s name and phone number. (5) Understand that Keokuk Animal Services must approve your application.

Name________________________________________________________
Address___________________________________________________________________________________________
City___________________________________________State___________________Zip_________________________
Home Phone_________ Work or Cell Phone___________________________________
Are you 18 years or older?_________________________
Do you live in a:  House_______Apartment_____________Condo____________Dorm_________With Parents________
I rent____________ I own___________ Mobile Home_____________ Farm_____________
Landowner’s Name____________________________________Landowner’s Phone______________________________
Landowner’s address_________________________________________________________________________

Have you ever adopted a pet from Keokuk Animal Services before?___________________________________________
Have you ever been refused adoption of a pet from Keokuk Animal Services or any other shelter?___________________

If yes, please explain. ________________________________________________________________________________
__________________________________________________________________________________________________

SECTION II

Please provide the following information about your household:

1. Which member of your family will hold primary responsibility for the
   FEEDING OF YOUR NEW PET________________________TRAINING________________________

2. Please tell us why you would like to adopt an animal from us. Check all that apply:  companion__________________to breed_____________for a child_____________companion for another pet_____________as a mouser_____________

3. What type(s) of pets do you own or have you owned during the past 5 years?

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<th>NAME/TYP/BD/ANAL</th>
<th>KEPT WHERE</th>
<th>SEX</th>
<th>AGE</th>
<th>SPAY/NEUTERED</th>
<th>STILL OWN</th>
<th>IF NO, WHY NOT &amp; DATE LAST OWNED</th>
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4. If you have pets now or had them in the past, who is (was) your veterinarian?
   Veterinarian’s Phone_________________________________________

5. What vaccinations has your pet had in the past year?

6. When was your pet’s last visit to the veterinarian?
   Reason?_________________________________________

7. If you move in the future, what will you do with your pet(s)?

8. (a) Are you aware that regular yearly preventative medical attention may cost several hundred dollars for a dog or cat and even more for a puppy or kitten?

9. Do any members of your household have allergies? Yes___________No______________
   What kinds?_________________________________________

10. What times would be convenient for a representative of Keokuk Animal Services to come to your home to check on the animal’s well-being?_________________________________________

__________________________________________________________________________________________________________________________________________
SECTION III
1. This pet will be alone (without human companionship) for about __________ hours per day_________ days per week.
2. Where will the cat be kept during:  The day___________________ The night_______________________________
3. Do you plan to let your cat exercise outdoors? Yes________ No________ How often?______________________
4. Do you understand that state laws and local ordinances require vaccinating and licensing cats?___________________
   Have you ever been involved with an Animal Control Department? Yes________ No ______________________
   If yes, what were the circumstances?__________________________________________________________________
5. How will you train your cat to: Stay off furniture/tables __________________________
   Not chew plants________________________
   Not scratch furniture________________________________________
6. What will you do if your cat: Urinates outside of the litter box?______________________
   Keeps you awake at night?____________________________________________________________________
7. What type of identification do you plan to place on your cat?______________________
8. Would you consider adopting another cat for companionship for the first?________
9. Do you feel that female pets should be spayed?______________________
10. Do you feel that male pets should be neutered?______________________
11. Do you plan to let your pet have kittens? Yes____ No____ If yes, why?______________________
12. Do you understand that pet overpopulation is a serious problem?______________________
13. It may take your pet two weeks or longer if other pets are involved, to adjust to its new home. Are you prepared to
   allow this much time to adjust? Yes __________ No ______________________
14. How did you learn about Keokuk Animal Services? Daily Gate City________ Friend________
   Veterinarian________ Other________

SECTION IV
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 pet. I understand that Keokuk Animal Service 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 Keokuk Animal Services.

Signature_____________________________________________________   Date________________________________

Please understand that there are specific policies on holding animals.

FOR OFFICE USE ONLY

Applicant interviewed:    Date___________________________________________By____________________________
Adoption approval:        Yes/No If no, why?______________________
I.D. Type_________________ Expiration Date______________________
Landowner’s approval:     Yes/No If no, why?______________________
Landowner’s contact name__________________________________________
Date Notified_______________________________________________________________________________________
Other comments____________________________________________________________________________________

References: (Non-relatives)

Name__________________________________Phone No. __________________________Best time to call___________
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