WELCOME TO KEOKUK ANIMAL SERVICES

DOG 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	downer's Name Landowner's Phone			
Landowner's address				
Have you ever adopted a p	et from Keokuk Ani	mal Services before?		
Have you ever been refuse	d adoption of a pet f	From Keokuk Animal Servio	ces or any other shelf	ter?
If yes, please explain.			-	

SECTION II

Please provide the following information about your household:

Number of adults	Number of Children	Ages of children
1. Which member of your family w		

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

NAME/TYPE/BREED OF ANIMAL	KEPT WHERE	SEX	AGE SPAYED/ NEUTERED	STILL OWN IF NO, WHY NOT & DATE LAST OWNED
			□ Yes	\Box Yes
			□ No	□ No
			□ Yes	□ Yes
			□ No	
			□ Yes	\Box Yes
			□ No	
			□ Yes	\Box Yes
			□ No	\square No

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?		
	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?_____

(b) Are you aware that in the first year food, pet supplies, and obedience training may cost several hundred dollars for either a dog or cat?_____

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

SECTION III					
1. Do you have a fenced yard? Yes					
			o fence?		
2. How many times a day do you plan to ta					
B. Do animals need shelter?Shelter is defined as an insulated and bedded structure to allow pets to stay was					
in winter and cool in summer and to be a					
. Do you intend to use a chain, rope or cable as the SOLE means of confining this pet?					
5. Do you understand that state laws and local ordinances require vaccinating, leashing and licensing dogs?					
Have you ever been involved with an Ar					
If yes, what were the circumstances?					
6. How do you plan to housetrain?					
7. How do you plan to prevent/correct beha	avioral proble	ems such as:			
Barking					
Fence Jumping					
Chewing					
Digging					
Aggressive behavior					
8. Do you plan to take your dog to training					
If yes, what type?					
9. This pet will be alone (without human co	ompanionshij	p) for about	hours per day and		
10. Where will the dog be kept during: the			at night		
11. Where will the dog be kept when left all					
12. What type of identification do you plan	to place on	your dog?			
13. Do you feel that female pets should be	spayed?				
14. Do you feel that male pets should be ne	eutered?				
15. Do you plan to let your pet have pupple					
16. Do you understand that pet overpopulat	tion is a serio	ous problem?			
17. It may take your pet two weeks or long				e you prepared to	
allow this much time to adjust? Yes					
18. How did you learn about Keokuk Anim			ity 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: 1	Date		By
Adoption approval:	Yes/No	If no, why?	
I.D. Type			
Landowner's approval:	Yes/No	If no, why?	
Landowner's contact nam	e		
References: (Non-relative	es)		
Name		Phone No	Best time to call
Name		Phone No	Best time to call
Name		Phone No.	Best time to call