



# ADOPTION APPLICATION

The first step in the process of adopting a pet from the Shores of the Mitten Animal Rescue and Transport (SMART Paws) is to complete this application. The application provides important information. Working with you, we will be able to determine if the adoption is in the pet's best interest, and the process ensures that you will find a pet well-suited to your lifestyle. Please provide detailed information for all questions.

Our adoption fee includes the cost for vaccinations and other medical care; the spaying or neutering of the animal; and microchipping. If the pet you have chosen has not yet been spayed or neutered, you may be able to take it home with you, but this will require you to sign an Early Release agreement with SMART Paws, a binding legal document that commits you to sterilize the pet at an appropriate age. A \$50.00 deposit will be collected for unsterilized pets. We will hold this in escrow and return it to you when you submit proof of sterilization.

To qualify for adoption, you must:

- Be at least 21 years old and have a valid driver's license or state Identification Card stating your current address
- Have the knowledge and consent of a landlord, if relevant
- Be able and willing to spend the time and money necessary to provide medical treatment, proper nourishment and care, and training for a pet

**Please note:** We reserve the right to refuse adoption to anyone. Please be advised that we will not adopt to persons who mislead or fail to provide accurate information on this application. A trusted volunteer may also be sent to your home to ensure the safety and compassionate care of the animal. You also reserve the right to stop the adoption process at any time.

**Shores of the Mitten Animal Rescue and Transport (dba SMART Paws) is a 501(c)(3) nonprofit corporation.**

Name of Animal applying for: \_\_\_\_\_ Date of Application: \_\_\_\_\_

## Applicant's Contact Information

Name(s): \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Phone: \_\_\_\_\_  Home  Cell  Work \_\_\_\_\_  Home  Cell  Work

Email: \_\_\_\_\_

## Housing Information

Housing Type:  House  Apartment  Condo  Mobile Home

How many years at this residence? \_\_\_\_\_ Do you rent or own? \_\_\_\_\_

If renting, do you have permission from Landlord/Complex Management to have a pet?  Yes  No

Please provide name of Landlord/Complex: \_\_\_\_\_ Phone: \_\_\_\_\_

Are you planning to move in the foreseeable future?  Yes  No If yes, where, when, and why? \_\_\_\_\_

Please describe the environment where the pet will be living if adopted: \_\_\_\_\_

## Family Information

Number of adults in the household (including yourself): \_\_\_\_\_

Children?  Yes  No If yes, how old are they? \_\_\_\_\_

Does anyone in the home have allergies to animals?  Yes  No

If yes, please explain: \_\_\_\_\_

Does anyone in the home have any objections to a new pet?  Yes  No

If yes, please explain: \_\_\_\_\_

For whom are you adopting the pet? \_\_\_\_\_

## Pet Ownership History

CURRENT PETS: Please list all pets currently living at your home

NAME	TYPE OF PET	AGE	SEX	SPAY/NEUTER?	TIME OWNED

PAST PETS: Please list all pets you have owned or cared for in the past 10 years

NAME	TYPE OF PET	AGE	SEX	SPAY/NEUTER?	TIME OWNED	WHERE NOW?

Have you ever sold, rehomed, or surrendered a pet?  Yes  No

If yes, please explain: \_\_\_\_\_

## Veterinary Reference

Please list each vet where your animal(s) received care over the past 10 years.

Vet/Clinic Name: \_\_\_\_\_ Time with this vet: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Alternate Vet/Clinic and Phone: \_\_\_\_\_

## Care Information

This pet will primarily be:  Indoor  Outdoor  Both

If indoor/outdoor, please explain in detail: \_\_\_\_\_

If applying for a cat, do you plan on declawing?  Yes  No

How will you introduce your new pet to any existing pets? \_\_\_\_\_

On average, how many hours a day will this pet be left alone? \_\_\_\_\_

Where will this pet be kept when no one is home? \_\_\_\_\_

How frequently do you travel (business/vacation)? \_\_\_\_\_

Please describe what you will do in the event of:

Overnight travel: \_\_\_\_\_

Moving: \_\_\_\_\_

Loss of employment: \_\_\_\_\_

Change in family dynamics: \_\_\_\_\_

Pet develops behavior issues (chewing, scratching furniture, biting, excessive crying, house soiling, spraying, getting onto countertops?): \_\_\_\_\_

Pet develops health issues: \_\_\_\_\_

What if treatment is expensive?: \_\_\_\_\_

Are you prepared for a lifetime commitment to this animal (cat: 15-20+ years, dog: 10-15+ years)?  Yes  No

Under what circumstances would you return an animal? \_\_\_\_\_

*I pledge that the above information is true and complete. I understand that the submission of this application does not guarantee that I will be able to adopt an animal from SMART Paws.*

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_