Adopting a Dog is a Doggone Good Idea!

Critter Care Adoptions, Inc. • 147 Pine Road • Evans City, PA 16033 • 724-538-8494

Thank you for inquiring about one of Critter Care Adoption, Inc's dogs or puppies. In order to promote your happiness and the happiness of your new family member, we need to gather the following information from you. Please remember that Critter Care Adoptions, Inc. reserves the right to refuse any adoption.

Date of Contact:_			_				
1. Name(s) of Add	opter(s)						
Address:							
Home Pho	one:		c	Cell or Work Ph	none:		
2. Describe all Ho	ousehold Memb	ers - includ	le names	and ages of a	dopters:		
Name:		Age: Relationship to Adopter(s):					
Name:		Age:		Relationship to Adopter(s):			
Name:		Age: _	Relationship to Adopter(s):				
Name:		Age: _	ا	Relationship to Adopter(s):			
Name:		Age: Relationship to Adopter(s):					
3. Does any mem	ber of your hou	sehold hav	e an aller	gy to dogs?	res i	NO	
4. Give approxima	ate work/school	schedule fo	or househ	old members			
5. How many hou	rs per day will th	he pet be w	ithout hu	man companio	nship?		
6. Who will care for	or the pet when	the family i	s away o	vernight or long	ger?		
G. Prilo Will Gale is	or the pot when	the lanny	o away o	vernight of lone	9011		

7. Would this be y	our first dog?	YES	NO _				
8. Do you own oth	er pets now?	YES	NO				
If yes, please com	plete the followi	ng - includ	e all spe	cies of pets:			
						T	
Name	Species	Breed	Age	Age when acquired	How long owned?	Indoor or outdoor?	Where do they sleep?
				aoquirea	- Owned:	outdoor:	they sicep:
es es							
	(If you need	more space	e - Pleas	e continue on	back of page.)	

9. How do your pets get along?
10. Will your pet(s) accept the new pet? YESNO
11. Have you had any pets in the past? YESNO If yes, please fill out the following information for all pets.
Name of pet:
When and how long did you own them? (Example: Owned from fall 1997 to December 2006 - 9 years)
How old when acquired? Species:
How did the relationship end? Please check one. Euthanasia? Gave to a shelter or another person? Other?
Please explain circumstances.
Name of pet: When and how long did you own them? (Example: Owned from fall 1997 to December 2006 - 9 years)
How old when acquired? Species:
How did the relationship end? Please check one. Euthanasia? Gave to a shelter or another person? Other?
Please explain circumstances.
Name of pet:
When and how long did you own them? (Example: Owned from fall 1997 to December 2006 - 9 years)

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How did the relationship	end? Please	check one.			
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Please explain circumsta	inces.				
			111-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
■ F	or additional pets,	please list the informati	ion on the back of the p	page.	
12. Have ALL of your pets been spayed or neutered - including current and previous pets? YESNO					
If no, which pet(s) and w	hy not?				
13. Have ALL your pets			vellness exam - includir	ng all current and	
previous pets.? YES	NO				
If no, which pet(s) and w	hy not?				
14. What veterinarian cl	inic(s) have you us	sed during the past SIX			
Veterinarian's/Clinic's Name	Phone number	Name of pet(s) seen	Person's last name under which the pet(s) is/are listed	What year(s) was/were pet(s) seen	
15. Do you own or rent	your home?	OWN RENT			
How long have you lived	there?				
16. If renting, Critter Ca	re Adoptions need	s the following informati	on on your landlord for	permission	
to house the pet.					
Name:		Address:			
Phone:					
17. Describe your home, i.e.: single dwelling, townhouse, condo, etc.; approximate size of home; type of					
neighborhood (suburban development, country, city, small town, etc.).					
18. Is there a yard?					
Fenced? YES	NO Descri	be yard and fence:	New York Control of the Control of t		

19. Do you have a pool? YESNO
20. How will you let the dog or puppy out to eliminate?
21. Are there times when the dog will be tied up? YESNO
22. How will the dog or puppy get exercise?
23. Where will your new pet spend most of his/her time during the day?
24. Where will your new pet spend most of his/her time during the night?
25. Will your dog spend any time in the garage? YESNOBasement? YESNO
26. Are pets allowed on furniture? YESNO
27. If you drive a pickup truck, would you allow the dog to ride in the back? YESNO
28. For puppies, is someone around in the middle of the day to let the puppy out to eliminate and to
feed him/her lunch? YESNO
29(a). Are you willing to housebreak a dog or puppy? YESNO
29(b) Have you housebroken a dog or puppy before? YESNO
30. Are you familiar with crate training? YESNO For puppies? YESNO
31. Have you done obedience training in the past? YESNO
If yes, where and when?
32. What dog food do or would you feed your pet(s)?
33(a). Name of the dog you are interested in:
33(b). Description of type of dog you are interested in and reason for the preference:
34. Why do you want this dog? □ Companion □ Companion for another pet □ House pet □ Guard dog
□Personal Protection □Other, please explain
35. Do you realize that when you adopt a dog or puppy you are making a long term commitment?
YES NO (Most dogs that are well cared for can live at least 14-18 years.)
36. If you move, will you take the dog with you? YESNO
37. If the newly adopted pet should need extensive veterinary care in the future, would you be willing and able to
pay for his/her operation, hospitalization, medications, etc? YESNO
38(a). How much are you willing to spend on medical bills for your dog? ☐up to \$100.00 ☐up to \$500.00
□up to \$1000.00 □up to \$5000.00 □whatever it takes

38(b). What would you do	if the vet bills go over this amount?
	nces would you relinquish your pet(s)? ☐ Divorce ☐ Moving ☐ Owner's ill health ☐ Expense ☐ New baby ☐ Pet urinating/defecating inappropriately ☐ Other
40. What provisions will yo	u make for the dog should you become unable to care for it?
Comments by applicant	
	THREE (3) PERSONAL REFERENCES At least two (2) need to be non-family references
Name:	
Phone Number:	Relationship:
Name:	
Phone Number:	Relationship:
Name:	
Phone Number:	Relationship:
authorize my veterinarian(s	re Adoptions, Inc will contact my veterinarian(s) and, if appropriate, my landlord. In to provide Critter Care Adoptions, Inc. with information related to any current or past norize my landlord to provide Critter Care Adoptions, Inc. with information relating to the pet in my rental unit.
Signature:	
Printed name:	
Date:	

Thank you for taking the time to complete this important questionnaire!