

DIRECTIONS FOR USE

Thank you for your interest in adopting one of our animals.

Once you have completed the application, you must save the completed form on your hard drive. You may then submit the completed application as an attachment via email back to the original Stratford Animal Control Representative that issued it to you.

Should you have any questions, please contact:

Stratford Animal Control

225 Beacon Point Road

Stratford, CT 06615

Phone: (203) 385-4068

Fax: (203) 385-5711

Email: ACOS@TownOfStratford.com

Animal Adoption Application

Pet you are applying for:	Animal Control Officer:
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Applicant / Co-Applicant Information

Date of Application:		
Last Name:	First Name:	DOB:
Last Name:	First Name:	DOB :
Address:		Apt/Unit #:
City:	State:	Zip:
Phone Number:	Email:	
Do you own or rent your home?		How long have you lived at this address?
Do you plan on moving in the next year?		What type of housing do you live in?
Landlord's name & phone number:		
How did you hear about the Stratford Animal Shelter?		

Family/Household Information

Number of (18 & over) adults in household:	Relationships:
Have all the adults in the household agreed to this adoption?	
Number of children (under 18) in household:	Ages of Children:
Have the children had any pets before?	If yes, what were they:
Do you expect your current family situation to change?	
Is anyone in the household allergic to animals?	If yes, who?
Why would you like to adopt an animal from us (Check all that apply)	
<input type="checkbox"/> Companion for self <input type="checkbox"/> Companion for child <input type="checkbox"/> Companion for another pet <input type="checkbox"/> Companion for another household member <input type="checkbox"/> Gift <input type="checkbox"/> Working dog (watch dog, hunting, guide dog, other). Please explain:	

Employment Information

Employer:	Position Held:	
Address:		
City:	State:	Zip Code:
Work Phone: () -	Length of employment?	

Pet Information

Please tell us about any pets that you have now or have had in the past

Name	Breed	Age	Gender	Spayed/Neutered	Where are they?
			M F	Yes No	
			M F	Yes No	
			M F	Yes No	
			M F	Yes No	
			M F	Yes No	

Have you ever given any animal away, or relinquished ownership rights to an animal shelter? _____
 If yes, what were the circumstances? _____

Stratford Animal Control

Under what circumstances would you (or have you) euthanize a pet?

Veterinarian Information

Veterinarian Name: _____ Veterinarian Phone: () - _____
When was your current pet's last visit to the vet and why? _____

New Pet Information

What will you feed your new pet? _____ How often will you feed your new pet? _____
How much time are you going to allow for your new pet to adjust to your home? _____
Are you able to afford a bill of \$500 (or more) for emergency veterinary care? _____
How much do you expect to spend on maintenance for your pet each year? _____
Are you committed to providing a responsible home for your pet's entire life (15+ years)? _____
If you have to move, what do you plan to do with your pet(s)? _____
Who in the household will be the pet's primary caregiver? _____
In case of emergency, who will take care of your pet? _____
Will this pet be kept inside or outside? _____
How many times per day do you plan to take your dog outside? _____
How do you plan to houstrain your new pet? _____
If this is a cat, how often will the cat go outside? _____
Do you have a fenced in yard? _____ If yes, what size and type? _____
How many hours per day will your pet be left alone? _____
Do you plan to spay/neuter your new pet? _____
What would you do if your pet develops a problem with:

- Digging: _____
- Barking: _____
- Chewing: _____
- Separation Anxiety: _____
- Aggression: _____

Disclosure and Release Clause

The animal that you are applying for, to our knowledge, may not have been tested or vaccinated against any disease, including rabies, which can be transmitted to humans. Under Connecticut General Statute 22-332(b) every effort is made by our staff to match animals to proper homes and filing an application does in no way guarantee that you will be approved for any animal. Your application may be denied for any reasonable cause. Stratford Animal Control makes no claims as to the health, temperament or mental position of any of its animals. Some animals change when brought out of the shelter environment and into its new environment. Due care should be taken with any new animals in their new homes.

I, _____, to the best of my knowledge, have not made any false statements in filing this application for adoption of a pet at the Stratford Animal Shelter. I have fully read and understand the above statement as well as all questions.

Signed: _____ Date: _____

Approved: YES NO By: _____

Reason for Denial: _____