



ISLE OF WIGHT COUNTY SHERIFF'S OFFICE

Animal Services Division



Mark A. Marshall
Sheriff

P.O. Box 80 · 13044 Poorhouse Rd. · Isle of Wight, VA 23397
Phone (757) 365-6318 · Fax (757) 365-0440

ADOPTION APPLICATION/CONTRACT

Name of animal you would like to adopt: _____ ID# _____

How did you hear about this animal? (Please circle any that apply)

IOW Shelter Website Visit to Shelter Facebook Petfinder Other _____

MY INFORMATION:

Name _____ Spouse/Partner Name _____

Home Phone _____ Work Phone _____ Cell Phone _____

Address _____

City _____ State _____ Zip Code _____

County of residence _____ Email address _____

Employer _____ City, State _____

Spouse's Employer _____ City, State _____

About My Home:

Number of Adults ____ number of children ____ Ages of Children _____

Do children visit your home frequently? ____ If yes, ages of children _____

Is anyone in your family allergic to pets? ____ Yes, dogs & cats ____ Yes, cats only ____ Yes, dogs only

No _____

If yes, who in the family is allergic and how severely? _____

I own my home I live in military housing I live with parents/relative I rent

Do you rent, live in a mobile home community or military housing? ____ If yes, Name of Landlord _____ Phone # _____.

Do you have a homeowners association? ____ If yes, Name _____

Phone # _____ of contact person.

If you rent, live in a mobile home community or in military housing, and if we cannot get in touch with your landlord we will need a copy of your lease.

References: list two references

Name _____ Phone _____

Name _____ Phone _____

Please list all pets in your household:

1) _____

Dog (breed), cat or other age sex spayed/neutered (yes or no) keep indoors/outdoors/both

2) _____

Dog (breed), cat or other age sex spayed/neutered (yes or no) keep indoors/outdoors/both

3) _____
Dog (breed), cat or other age sex spayed/neutered (yes or no) keep indoors/outdoors/both

4) _____
Dog (breed), cat or other age sex spayed/neutered (yes or no) keep indoors/outdoors/both

Do you currently have a veterinarian? If so, who?

Name _____ Phone _____

Are you animals up to date with for their shots? _____ Date shots given _____

Have you had other dogs or cats in the past 5 years? _____ If yes, how many? _____ dogs _____ cats

Where are they now? _____

Have you previously adopted from Isle of Wight Animal Shelter? _____ if so when? _____

Do you still have the animal? _____ If not, why? _____

Have you ever turned an animal into a shelter? _____ If yes, why? _____

My Preferences for Adopting a Dog

At its adult size, my ideal dog would be (check any that apply): _____ small (5-25lbs)
_____ Medium (25-50 lbs.) _____ Large (50-80 lbs.) _____ extra-large (80+lbs) _____ no preference

Please check all reasons for adopting a dog: _____ companion for self _____ child's pet
_____ Gift _____ Companion for other animal _____ hunting _____ Watch dog for home

Please describe the energy level you are looking for: _____ low _____ medium _____ high

Please CIRCLE the desirable traits in a dog you adopt:

- | | | |
|---------------------------------|----------------------------|-------------------------------|
| Already housebroken | good with cats | rarely barks |
| Good with strangers | doesn't pull on leash | can be walked off leash |
| Likes to fetch/play | doesn't dig | low shedding |
| Good watch dog | doesn't chew | Already knows basic obedience |
| Will jog or run with me | good watch dog | doesn't chew |
| Likes other dogs | gentle with young children | good with livestock |
| Can be left in house unattended | | |

Are you planning on taking your dog to obedience class? _____

Are you prepared to spend \$400 -\$700 a year (food, medical, vet care) for this pet? _____

How long will you give your new pet to adjust to its new home? _____

Are you prepared to housetrain? _____ How do you plan to achieve those goals? _____

Will your dog be kept: _____ primarily indoors _____ indoors and outdoors _____ outdoors only

How many hours will your dog be left alone each day? _____

Where will your dog sleep at night? Crate _____ kitchen _____ family member's room _____
dog house _____ basement _____ garage _____ other _____

I have a: fenced yard _____ invisible fence _____ dog house _____ outside kennel/pen _____
Cable/runner _____ stationary tie-out _____ unfenced acreage (how many acres) _____

Will leash walk dog daily _____

Under what circumstances would you give up this pet? Bites/aggressive _____ difficult to housetrain _____

Chews/destructive when left alone _____ requires too much exercise _____ wanders _____

medical expenses _____ moving to "no pets allowed" housing _____ moving out of state _____

My Preferences for Adopting a Cat

Please check all reasons for adopting a cat: companion for self _____ child's pet _____ gift _____

Companion for other animal _____ barn cat/mouser _____

Please describe the energy level you are looking for: low _____ medium _____ high _____ doesn't matter _____

Please check what desirable traits you are looking for in a cat you will adopt:

already litter trained _____ already declawed _____ very affectionate _____ quiet _____ talkative _____

older and settled _____ adventuresome _____ low shedding _____ doesn't scratch furniture _____

gentle with young children _____ good with strangers _____ good with dogs _____ other _____

Do you plan on declawing your cat? _____ If yes, why _____

What would you do if your cat developed litter box problems? (check all that apply)

Check with vet _____ return cat to shelter _____

Attempt to retrain; how? _____

Are you prepared to spend \$200-\$400 a year (food, medical, vet care) for this pet? _____

How long will you give your new pet to adjust to its new home? _____

Will your cat be kept: indoors only _____ indoors, but outside while I'm with him/her _____

Coming and going daily _____ spending most of the time outside _____ living outdoors only _____

Where will your cat sleep at night? _____ indoors _____ outdoors _____ basement _____ garage/barn _____

Other _____

Under what circumstances would you give up this pet?

Bites/aggressive _____ litter box accidents _____ destructive to furniture/carpeting _____ too active at night _____

Aggressive with other pets _____ moving to "no pets allowed" housing _____ moving out of state _____

Medical expenses/animal ill _____ other _____

Standards for Adopting Other Companion Animals

1) Provide the animal with adequate nutrition daily including fresh water and food.

2) Provide the animal with a cage big enough for some exercise (size will be determined before adoption depending on animal being adopted) and give the animal attention daily.

3) Never house the animal outdoors, in a garage or any area uninhabitable by human.

4) Provide adequate veterinary care for the animal if he/she should become sick or injured for the life of said animal.

5) The animal is not to be used for breeding, be used for testing or laboratory purposes, or be used neither for vivisection nor in any inhumane way.

Please read and initial each of the following:

_____ I have never been convicted of animal cruelty, neglect, and/or abandonment.

_____ I am willing to permit Isle of Wight Animal Services Division to conduct a safety inspection of my home and property to ensure that my pet will have adequate care.

_____ I understand that, if applicable, I must have the pet inoculated for rabies and must purchase a county license within 10 days of adoption or within 10 days of the pet turning four months old.

_____ I understand that there is no guarantee on the health of any animal adopted from the Isle of Wight Animal Shelter.

_____ I certify that the information I have provided in this application is true and correct: I authorize verification of all statements presented in this application; and I am at least 18 years of age.

_____ Should the animal be returned or seized by the Isle of Wight County Animal Shelter, according to the terms of this contract, I understand that the adoption fee is final and non-refundable.

I understand that at the time of the adoption this questionnaire becomes part of a legally binding contract, and that any false statements or breach of contract entitles the Isle of Wight Animal Shelter to reclaim the adopted pet and/or give the Isle of Wight Animal Shelter the full ability to prosecute for the performance of this contract.

Signature _____ Date _____

Driver's license # _____ State _____

STAFF ONLY _____ **Staff Initials/Database checked:** _____

_____ **Non Adoption List Checked** _____ **Landlord Approval**

_____ **Approved** _____ **Disapproved** _____ **Pending**

If disapproved, explain why: _____