



Established 1948

89 Mill Road, North Haven, CT 06473  
(203) 239-2641  
[www.theanimalhavenct.org](http://www.theanimalhavenct.org)

Office use only

Receipt # \_\_\_\_\_

Cash

Check # \_\_\_\_\_

## DOG ADOPTION APPLICATION

(please print clearly)

**PLEASE BE ADVISED THAT THE ANIMAL HAVEN RECEIVES MANY ADOPTION APPLICATIONS A WEEK AND DOES ITS BEST TO REVIEW THEM AND GET BACK TO EACH POTENTIAL ADOPTER AS SOON AS POSSIBLE. ALTHOUGH WE WILL DO OUR BEST TO GET BACK TO YOU WITHIN TWO WEEKS, IF YOU DO NOT HEAR FROM US WITHIN THAT TIME FRAME, PLEASE ASSUME THAT THE ANIMAL IS NO LONGER AVAILABLE FOR ADOPTION OR WE FELT THAT THE ANIMAL WAS NOT A GOOD FIT FOR YOUR PARTICULAR CIRCUMSTANCES. THANK YOU FOR APPLYING TO ADOPT AN ANIMAL FROM THE ANIMAL HAVEN. WE APPRECIATE YOUR THINKING OF OUR SHELTER WHEN CONSIDERING THE ADOPTION OF A PET.**

Today's Date: \_\_\_\_\_

Name of Pet for adoption: \_\_\_\_\_

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

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

I am at least 21 years of age: Yes  No

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

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

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

Please indicate your living situation:

Own house	_____	Own condo**	_____	Rent house*	_____
Rent apartment*	_____	Rent condo**	_____	Other	_____
Co-op**	_____	Mobile home	_____		

\*If renting we require a lease stating the pet policy or your landlord's name and phone number: \_\_\_\_\_

**\*\*Co-op/Condo – we require the by-laws stating the pet policy. It is our policy to verify that you can have a pet before approving your application.**

How long have you lived at this address? \_\_\_\_\_

Are you planning to move within the next year or two? Yes  No

What would you do with your pets if you move? \_\_\_\_\_

How many people live in your home, including yourself? \_\_\_\_\_

Please provide the names and ages of all those living in your home: \_\_\_\_\_

Do all members of your household agree to the addition of a new pet to your home? Yes  No

If no, please explain \_\_\_\_\_

Have all members of your household met the dog that you would like to adopt and do they also want to adopt him/her? \_\_\_\_\_ *It is our policy that all members of the household meet the pet for adoption before the adoption application can proceed. We can arrange a special meeting if our open hours do not work with an individual's schedule.*

If your family situation were to change (e.g., divorce, new baby, marriage), would you keep your pet(s)?

Please list all current and/or previous pets in your home starting with the most recent:

	Name	Age	Breed	Sex	Spayed/ Neutered	Indoor And/ Or Outdoor	Alive/Deceased	If Deceased, When?
Dog 1								
Dog 2								
Dog 3								
Dog 4								
Cat 1								
Cat 2								
Cat 3								
Cat 4								

Any additional pets? \_\_\_\_\_

Please explain what happened to your previous pets. Were any lost? Given away? Surrendered to a shelter? If they passed away, what was the cause of their death?

\_\_\_\_\_  
\_\_\_\_\_

Veterinarian name/practice: \_\_\_\_\_

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

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

I agree to let The Animal Haven contact my veterinarian. (initial) \_\_\_\_\_

If this is your first pet, what veterinarian practice do you plan to use? \_\_\_\_\_

What emergency hospital do you plan to use? \_\_\_\_\_

Have you ever participated in formal obedience dog training? Yes  No

Would you be willing to take your new dog to obedience training or a behaviorist? Yes  No

If no, please explain why not: \_\_\_\_\_

Where will you keep your dog during the day? \_\_\_\_\_

Where will you keep your dog during the night? \_\_\_\_\_

Where will your dog sleep? \_\_\_\_\_

Do you intent to crate your dog? Yes  No  Maybe

If yes, how long do you intend to crate your dog each day? \_\_\_\_\_

If you were advised by The Animal Haven to crate your dog at first under certain circumstances, would you be willing to use a crate for your dog?

If no, please explain why not. \_\_\_\_\_

If crating is not an option, do you have a dedicated room in your home that can be safely set up for a dog, especially at first, while no one else is at home (please explain, size, location, furniture, and other characteristics of the room) \_\_\_\_\_

How many hours will your dog be alone each day? \_\_\_\_\_

Under what circumstances, if any, would you give up your pet?

**Circle/Check all that apply**

- New baby    Moving    Shedding    Nipping    Biting    Chewing Furniture/other items  
Allergies    Divorce    Pet's health    Behavior problems    Children's loss of interest  
Travel    Pet's age    Conflict with other pets    Conflict with family member

Are you aware that a dog can live to be 15 years old or older?    Yes     No

Are you prepared to make a lifelong commitment to your dog?    Yes     No

It may take a few weeks, or even months, for your new pet to adjust to his/her new home. Are you willing to wait out this adjustment period?    Yes     No

If you are applying to adopt a puppy, have you ever had a puppy before?    Yes     No

What behaviors are you **not willing** to work on? (e.g., house-training, chewing, barking, digging)

\_\_\_\_\_

Do any of the residents in your home have allergies to any type of animal?    Yes     No

If yes, who has allergies and what allergies does he/she have? \_\_\_\_\_

What would you do if a family member became allergic to the dog? \_\_\_\_\_

How do you plan to exercise your dog?

Fenced yard        Type of fence: \_\_\_\_\_; height: \_\_\_\_\_

Tie-out        Type of tie-out: \_\_\_\_\_

Leash walking   

Invisible fence   

Run/roam free        If run/roam free, where would the dog run/roam free? \_\_\_\_\_

Dog Park   

What arrangements will you make for the care of your pet(s) in case of an emergency, if you go on vacation, or if you become temporarily unable to care for your pet(s) \_\_\_\_\_

What arrangements will you make for the care of your pet(s) if you became permanently unable to care for your pet(s)? \_\_\_\_\_

If you intend to leave the pet(s) in someone else's care, please provide that person's name and number \_\_\_\_\_

**The Animal Haven strongly recommends that you learn as much as possible about owning an adult dog or puppy. They require a lot of time, patience and effort. Before you adopt, please speak to our staff for information regarding dog and puppy care.**

Please list questions or concerns about which you would like more information: \_\_\_\_\_

\_\_\_\_\_

I hereby state that I am financially, physically and mentally able to provide adequate medical care, nutrition, exercise and love to my new pet and will not abuse or neglect said animal in any way.  
\_\_\_\_\_ (initial)

I understand that The Animal Haven promotes adoption of an animal for his/her entire life. I am committing to adopting and providing a loving home to this animal for his/her entire life.  
\_\_\_\_\_ (initials)

All of the aforementioned information is true, correct and complete to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_



## **Adoption Agreement and Release from Liability**

**In consideration for the opportunity to adopt the animal(s) set forth in my Dog Adoption Application (which is hereby incorporated herein and made part of this agreement), I agree to the terms of this agreement and the waiver and release set forth herein.**

**Upon signing this Agreement, I assume full responsibility for the care and welfare of each of the animals set forth in my Dog Adoption Agreement (these animal(s) are hereinafter referred to as the “animal”). I agree to provide the animal with loving care and all routine and required veterinarian services that the animal needs. I also agree to insure that the animal is licensed to the extent required by state law.**

**I agree to provide The Animal Haven , Inc. (“The Animal Haven”) with access to the animal if, in The Animal Haven’s sole discretion, it feels a need to examine or inquire about the animal. I understand that The Animal Haven may reclaim the animal if he or she is being neglected or abused in any way.**

**I agree to relinquish all rights to the animal and return him/her to The Animal Haven if prior ownership is established.**

**I agree that upon signing this Agreement, I shall be fully responsible for the animal and any expenses incurred, including veterinarian expenses, on his/her behalf. I also assume full responsibility for any damage done by the animal once he/she comes home with me. I understand and agree that upon my signing this agreement, The Animal Haven will not pay for or contribute toward any expenses incurred on behalf of or due to the behavior of the animal, including any veterinarian expenses. I understand that The Animal Haven does not, in any case, guarantee or warrant the health, temperament, disposition, or behavior of the animal, and I agree to accept the animal with this understanding.**

**I understand that although the animal appears healthy, he/she might have undiagnosed problems or be incubating an infectious condition or other disease.**

**I have been informed that the animal has a diagnosed medical condition, injury, or congenital defect. I have been informed that the animal may have additional undiagnosed medical problems or be incubating an infectious condition or other disease.**

**I understand that after arriving home with me, the animal could show signs of sickness from a virus or other condition to which he/she might have been exposed at the shelter (or elsewhere) or from the stress of being in a new environment. I also understand that the animal may be confused, nervous and/or scared when he/she comes home, that his/her habits may change in a new environment, and that I should allow at least 60 days for the animal to adjust to his/her new home.**

**I hereby agree that I, and my assignees, heirs, guardians, and legal representatives, will not make a claim against or sue The Animal Haven or its employees, officers, directors, agents or contractors for any damages, including personal injuries or property damage, caused by the animal and/or resulting**

from my adoption of the animal. I HEREBY WAIVE ANY SUCH CLAIMS AND RELEASE AND DISCHARGE THE ANIMAL HAVEN AND ITS OFFICERS, EMPLOYEES, AGENTS, DIRECTORS AND CONTRACTORS FROM ALL ACTIONS, CLAIMS, OR DEMANDS THAT I, MY HEIRS, GUARDIANS, AND/OR LEGAL REPRESENTATIVES NOW HAVE, OR MAY HAVE IN THE FUTURE, FOR ANY PERSONAL INJURIES, PROPERTY DAMAGE AND/OR OTHER DAMAGES CAUSED BY THE ANIMAL AND/OR RESULTING FROM MY ADOPTION OF THE ANIMAL, INCLUDING ANY DAMAGES DUE OR CLAIMED TO BE DUE TO ANY NEGLIGENCE OF THE ANIMAL HAVEN, ITS OFFICERS, EMPLOYEES, AGENTS, DIRECTORS AND/OR CONTRACTORS. I ALSO AGREE TO INDEMNIFY THE ANIMAL HAVEN WITH RESPECT TO ANY SUCH CLAIMS BY THIRD PARTIES, AND I ASSUME THE RISK OF AND FULL RESPONSIBILITY FOR ANY SUCH INJURIES OR DAMAGES.

I also agree that if, for some reason, this adoption does not work out and I do not want to keep the animal, I will contact The Animal Haven and will return him/her to The Animal Haven, although I will not be entitled to a refund of the adoption fee paid upon the signing of this Agreement. I also understand that The Animal Haven may not be able to take the animal back, due to space limitations or other considerations. If The Animal Haven is not able to take the animal back, it will do its best to suggest alternative options. I also understand that the animal may not be sold, traded, surrendered or given away for any reason without prior notice to and the written consent of The Animal Haven.

I understand that The Animal Haven has the right to reclaim the animal if I fail to comply with the provisions of this agreement or if any of the information provided in my Dog Adoption Application is untrue, incorrect, or incomplete.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Adoption Counselor: \_\_\_\_\_ Date: \_\_\_\_\_

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**THIS SECTION TO BE FILLED OUT BY THE ANIMAL HAVEN ADOPTION COUNSELOR**

Dog's Name: \_\_\_\_\_ Breed: \_\_\_\_\_ Color: \_\_\_\_\_  
DOB: \_\_\_\_\_ Weight: \_\_\_\_\_ Sex: \_\_\_\_\_

<b>Date of Vaccinations:</b>	<b>Vaccinations Due:</b>
Distemper _____	Distemper _____
Rabies _____	Rabies _____
Heartworm Test _____	Heartworm Test _____
Heartworm/flea and tick prevention _____	Heartworm/flea and tick prevention _____

Other: \_\_\_\_\_

## REFERENCES

Please Provide Two References:

Name:

Telephone number(s):

Relationship to you:

Name:

Telephone number(s):

Relationship to you:

## VET CHECK

As part of The Animal Haven's adoption application process, we do a vet check regarding your current and previous animals.

The following questions are among those that we ask when we communicate with your veterinarian. We ask these questions regarding all of your previous animals as well as your current animals. Unfortunately, if any of these questions are answered "no," your adoption application will be denied.

- Are/were all of your animals up-to-date with their vaccinations?
- Do/did you take your animals to the vet for their annual checkups?
- Are/were all of your animals spayed/neutered?
- With respect to any of your animals that have gotten sick/ill, did you follow the veterinarian's recommendations and plan of treatment?