Charles Smithgall Humane Society Adoption Center

DOG PRE-ADOPTION QUESTIONNAIRE

Email completed PAQ to smithgallhumanesociety@windstream.net

NAME	DATE
ADDRESS	
CITY	STATEZIP
HOME PHONE	WORK PHONE
CELL PHONE	EMAIL
1. Are you 18 or older? Yes No	Do you live with your parents? Yes No
2. How long have you lived at the above address	s?
3. Do you own rent / your hous	e apartment / other
a. If you rent, does your lease allow pets? Y	'es No
b. What is your landlord's name and phone r	number?
4. Will your new pet live inside outside	Do you have a fenced yard? Fenced area?
5. May we do a home inspection of the living arra	angements for your new pet? Yes No
6. Do you have pets at present? Dog C	at Other
a. Are they spayed / neutered? Yes N	o If not, why not?
b. Do they live inside outside	c. Are their shots up to date? Yes No
d. Who is your veterinarian?	Phone #
7. Are you willing to accept responsibility for you	ir cat or dog for the next 10-16 years?
8. Who will be responsible for your pet's training	?
9. Do you intend to take your pet on family vaca	tions? If not, what arrangements will you make?
10. If you move, will you take your pet with you?	If not, why not?
11. Do you have a regular source of income? Ye	s No
12. How much are you willing to pay annually for	medical costs for your pet?
13. Have you ever lost a pet or turned one in to a	an animal shelter? What were the circumstances?
14. List the people who live in your home (adults	, children and ages of children):

This is NOT an application to adopt. It is a questionnaire to assist in our evaluation of potential adopters and their environment. Finding the best fit for our residents is our priority. Completing this form is not a guarantee of adoption nor does it imply that this questionnaire is receiving sole consideration for a specific resident. It must be completed before being offered an application to adopt.