



# **Tazzy Animal Rescue Fund**

## **Dog Adoption Application**

**Name of Dog you are applying for:**

**Name of Second Choice Dog**

**Name of Third Choice Dog**

**Why do you want to adopt this dog?**  
*(Check all that applies)*

Companion

Companion for another pet

House Pet

Watch Dog

Guard Dog

Hunting

## **PERSONAL AND HOUSEHOLD INFORMATION**

**Applicant Name:**

**Date of Birth:**

**Co-Applicant (if applicable)**

**Date of Birth:**

**Street Address:**

**City, State, Zip:**

**Email Address**

**Home Phone**

**Cell Phone**

**What is your occupation?**

**How long have you been at your current job?**

**Employer:**

**Work Phone:**

**Work Address:**

**Work City, State, Zip:**

Spouse

Significant Other

Children

Roommate

Live Alone

**Who shares your household?**

*(Check all that applies)*

**If you have children, what are their ages?**

**If your present relationship were to change, with whom will the dog remain?**

**At what age do you feel children are responsible enough to care for a dog without assistance (ie walk, feed, scoop, etc.)?**

**Does anyone in your household have allergies to animals?** Yes No I Don't Know

**If Yes, how will this be managed?**

**Are you planning on moving in the next 12 months?** Yes No

**Is so, where?**

**What type of home do you live in?**

House Townhouse / Condo  
Duplex / Triplex  
Apartment Other  
If other, explain:

**Do you own or rent?** Own Rent Live with Parents

**If you rent, do you have written permission to have animals in your home?** Yes No

Name:

**If you rent, please provide your landlord's name and phone numberr** Phone:

**If you rent, do you share your yard with any other tenants?** Yes No

**Do you have a completely fenced yard?** Yes No

**What type of fence?**

Brick / Cinder Block  
Privacy Wood  
Picket / Slotted Wood  
Chain Link  
Invisible  
Other If other, please explain:

No Fence

**What is the height of your fence (at the lowest point)?t)?**

Latch

Keylock

**Which of the following is used to secure your gate:**  
(Check all that applies)

Deadbolt

Padlock

Do not lock the gate because:

**Do you have a gardener, house keeper or pool cleaner?**

Yes No

**If yes, where will the dog be while they are working?**

Yes No Explain:

**Do you trust the workers not to let the dog out?**

**Do you have any poisons (rat, mouse, or snail bait) where the animal will be kept?**

Yes No

**Is someone home during the day?**

Yes No If yes, who?

## **PET CARE AND OWNERSHIP**

**How many hours will the dog be alone during the day?**

**If you work full time away from home, what are your plans for the dog during that time away?**

**Which rooms, if any, are off limits to dogs?**

**Will the dog be allowed on the furniture?**

Yes No

**Will you exercise your dog on a regular basis?**

Yes No

**What exercise method and how often??**

**Where will the dog be kept during the day?**

**Where will the dog be kept during the night?**

House Sitter

Veterinarian

Kennel

Friend's House

**When you go on vacation, who will care for the dog?**  
(Check all that applies)

Pet Sitter / Friend comes by to feed but doesn't stay

Dogs goes on vacation with me/us

Other: Explain

**Will you keep the dog's vaccinations up to date?**

Yes No

**What type of food will you feed your dog?**

Dry Canned Dry and Canned  
Raw

How many times per day will you feed your dog?

Who will be responsible for feeding your dog?

Would this be your first pet? Yes No

Do you currently have any pets? Yes No

If Yes, please provide the following information:

**Current Pet 1:**

Type of Pet (Dog, Cat, Bird, etc.)

Breed

Age

Gender Male Female

Neutered/Spayed Yes No

Current on Vaccinations Yes No

How do you feel this pet will adjust to a new animal?

**Current Pet 2:**

Type of Pet (Dog, Cat, Bird, etc.)

Breed

Age

Gender Male Female

Neutered/Spayed Yes No

Current on Vaccinations Yes No

How do you feel this pet will adjust to a new animal?

**Current Pet 3:**

Type of Pet (Dog, Cat, Bird, etc.)

Breed

Age

Gender Male Female

Neutered/Spayed Yes No

Current on Vaccinations Yes No

How do you feel this pet will adjust to a new animal?

**Current Pet 4:**

Type of Pet (Dog, Cat, Bird, etc.)

Breed

Age

Gender Male Female

<b>Neutered/Spayed</b>	Yes	No
<b>Current on Vaccinations</b>	Yes	No
<b>How do you feel this pet will adjust to a new animal?</b>		

**Have you owned any pets in the past?** Yes No

**If Yes, please provide the following information:**

**Past Pet 1:**

Type of Pet (Dog, Cat, Bird, etc.)  
Breed  
Age  
Gender Male Female  
Neutered/Spayed Yes No  
How long did you own this pet?  
What happened to this pet?  
If died, please explain:

**Past Pet 2:**

Type of Pet (Dog, Cat, Bird, etc.)  
Breed  
Age  
Gender Male Female  
Neutered/Spayed Yes No  
How long did you own this pet?  
What happened to this pet?  
If died, please explain:

**Past Pet 3:**

Type of Pet (Dog, Cat, Bird, etc.)  
Breed  
Age  
Gender Male Female  
Neutered/Spayed Yes No  
How long did you own this pet?  
What happened to this pet?  
If died, please explain:

**Past Pet 4:**

Type of Pet (Dog, Cat, Bird, etc.)

Breed

Age

Gender

Male      Female

Neutered/Spayed

Yes      No

How long did you own this pet?

What happened to this pet?

If died, please explain:

**Which of the following would force you to give up your dog?**

*(Check all that applies)*

Divorce / Separation

Move out of State

Move where pets are not allowed

Dog barks a lot

Dog nips at strangers

Dog bites children

Marry someone with allergies

Dog loses control of bladder

Dog develops chronic illness

Large Vet bills

Dog is untrainable

Dog is not the kind of dog I thought it would be

Planning on having a baby

Just gave birth to a baby

Dog doesn't get along with current pet

Neighbors complain about pet

Other: Explain:

Would never give up a pet

**Do you currently have a veterinarian?**

Yes      No

Name:

**If Yes, please provide us with your vet/clinic's Name and Phone Number**

Phone:

**Are you prepared to cover any vet expenses your pet may incur throughout it's lifetime?**

Yes      No

**Is there a limit?**

Yes      No

**How much is too much?**

**Would you consider euthanizing your pet because of medical costs?**

Yes      No

Clean them myself

**What do you think is the best way to keep your animal's teeth clean?**  
*(Check all that applies)*

Never thought about it

Have a professional clean them

It's not necessary

Flea Spray

Flea Bath

Flea Collar

**Which of the following would you use for flea control?**  
*(Check all that applies)*

- Herbal Flea Collar
- Flea Busters
- Flea Comb
- Program, Advantage or Frontline

**What is a behavior that would not be acceptable to you?**

- Swat nose
- Spank with hand
- Spank fanny with newspaper

**What method of discipline will you use if your dog chews up your favorite shoes?**  
*(Check all that applies)*

- Stern voice
- Scruffing
- Other: Explain

**If necessary, would you be willing to hire a trainer or take your dog to obedience classes?**

Yes      No

**What method do you intend to use to housetrain your dog?**

- Public Park
- Hike
- Beach

**In which of the following situations would you allow your dog off leash?**  
*(Check all that applies)*

- Neighborhood Walk
- My front yard
- Dog Park
- Other: Explain

**If you become ill or die, what plans will you make for the care of your pet?**

**Please provide us with 2 personal references:**

**Personal Reference 1 Name and Phone**

Name:

Phone:

**Personal Reference 2 Name and Phone**

Name:

Phone:

**Are you willing to have a representative from Tazzy Animal Rescue Fund come to see where the pet will be living?**

Yes      No

**If no, why?**

**How did you hear about Tazzy Animal Rescue Fund?**

**Have you applied to adopt an animal from us in the past?**

Yes      No

**Have you applied to adopt an animal from another rescue group?**

Yes      No

**If so, what happened?**

**Would you like to be added to our mailing list?**

Yes      No

**Do you have any comments or additional information that you feel is necessary in consideration for adopting this dog?**

**I understand that filling out this application does not guarantee the adoption from Tazzy Animal Rescue Fund. I certify that all of the above information is honest and true.**

X \_\_\_\_\_  
Signature

X \_\_\_\_\_  
Printed Name

X \_\_\_\_\_  
Date