

**ADOPTION APPLICATION - CITRUS COUNTY ANIMAL SERVICES**

Print Your Name		Date
Address		
City	State	Zip
Home Phone	Cell Phone	E-Mail Address

*Please read the following section carefully. In order to be considered as an adopter, you must:*

- ☺ You must be 18 years of age or older.
- ☺ Have current photo identification showing your age and present address.
- ☺ Be willing and able to provide training, medical care and loving attention for a pet.
- ☺ Be willing to take your new pet to a veterinarian within 3 days for examination and treatment if needed, **AT YOUR OWN EXPENSE.**
- ☺ Have your new pet vaccinated against rabies and purchase a Citrus County License annually.
- ☺ Provide your new dog/cat with heartworm/flea prevention medication throughout its life.
- ☺ Abide by all the rules in the adoption contract and follow all County Ordinances.

*Understand that Citrus County Animal Services reserves the right to deny any adoption application.*

**PERSONAL INFORMATION**

Drivers License: \_\_\_\_\_ Name of Veterinarian \_\_\_\_\_

- ( ) Check Type of Housing ( ) Own House ( ) Own Condo ( ) Rent House  
( ) Rent Apartment/Mobile ( ) Government Housing ( ) Boarding

How long at present address \_\_\_\_\_ Are you planning on moving in the next 6-12 months? \_\_\_\_\_

If you move, what will you do with your pet? \_\_\_\_\_

Do you have access to a yard? \_\_\_\_\_ Approximate size? \_\_\_\_\_

Yard is ( ) open ( ) fully enclosed What type of fence? \_\_\_\_\_ Height of fence? \_\_\_\_\_

Who will be responsible for the pets care? \_\_\_\_\_

Does anyone in the household have animal allergies? \_\_\_\_\_

**\*\*If you do not own the property upon which you live, Citrus County Animal Services has my permission to contact the property owner to verify the current pet policy.**

Adoption Councilor Signature \_\_\_\_\_

Description of animal \_\_\_\_\_  
( ) approved ( ) denied

PET HISTORY: What pets do you currently have in your home? Please include all dogs, cats, and ferrets.

Type of animal	Age	Sex	Sterilized	Kept where	How long owned	Last Vet appointment

Have you ever brought an animal to a shelter under any circumstances?    ( ) yes    ( ) no

If you answered yes, please explain. \_\_\_\_\_  
 \_\_\_\_\_

How did you hear about us? Circle all that apply: News paper    Television    Web Site    Pet store  
 Repeat Customer    Friend    Other \_\_\_\_\_

I also want this pet to be (Circle all that apply) Watchdog    Companion    Hunter    Breeder    House pet  
 Mouser    Companion for other pets    For the children

How many hours a day will the pet be left alone? \_\_\_\_\_ Where will pet be kept during the day? \_\_\_\_\_

Where will pet be kept during the evening? \_\_\_\_\_

If you plan to leave pet outdoors, describe outdoor shelter you will provide  
 \_\_\_\_\_

How will you keep pet confined to your property? Circle all that will apply.  
 In house    Kennel    Fenced yard    On chain    Garage    Patio    Tethered    Puppy day care

How will you exercise the dog? \_\_\_\_\_

If you must give up your pet, what will you do? \_\_\_\_\_

**\*\*Citrus County Animal Services reserved the right to do a wellness check on any pet at any reasonable hour.**

I hereby release to Citrus County Animal Services all veterinary records of any and all animals I own or have owned. I certify that all the information in this application is true and I understand that false information may void the application.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date