Pet Adoption Application

Animal Care & Control of NYC is a non-profit organization that is committed to finding appropriate homes for animals in our care. Pet ownership is a serious responsibility, and we strive to ensure that each person who adopts from us is aware of these responsibilities and is prepared to meet the pet's needs. Therefore, the adoption process does take some time as our Adoption Counselors will review your application with you, answer all of your questions, and provide you with support and materials. Thank you in advance for your cooperation! **Please note: You must be 18 years or older to adopt an animal.**

Please Complete All Fields

CONTACT AND HOUSEHOLD INFORMATION

Name:_____ Email:_____

Address:_____
          Street / Apt. # / City / State / Zip Code

Home Phone:_____ Work Phone:_____ Cell Phone:_____

People living in your household:

Name	Contact Number	Relationship	Age

Type of Residence:

Do you rent or own? ____ Type of Home: House ____ Apartment/Condo ____ Other:_____

If Apartment/Condo, what are the rules about pets? _____

If you rent, please list landlord name and phone number:_____

LIST BELOW ALL PETS CURRENTLY LIVING IN YOUR HOUSEHOLD

Species/Breed?	Owned how long?	Age?	Sex?	Spayed / Neutered?	Current on vaccinations?	Kept indoors or outdoors?

LIST BELOW PETS THAT YOU HAVE PREVIOUSLY OWNED

Species/Breed?	Owned how long?	Age?	Spayed/Neutered?	Kept indoors or outdoors?	What happened to him/her?

VETERINARY/CLINIC NAME AND PHONE NUMBER:

_____

PERSONAL REFERENCES:

Name	Relationship to Adopter	Contact information

YOUR NEW PET:

What is your primary reason for adopting? _____

How many hours a day will your pet be left alone?_____ Where?_____

Under what circumstance would you not keep your pet?
___ Divorce ___ Illness in family ___ Moving ___ New Baby ___ New Job ___ Housebreaking problems
___ Destructive behavior___ Biting/Scratching ___ Fleas ___ Allergies ___Shedding ___Conflicts with children
___ Conflicts with other pets ___ Animal becomes ill ___ High veterinary costs ___ None of the above
___ Other (please explain) _____

_____

The information I have provided in this Pet Adoption Application is true and accurate. I understand that giving false information or refusing to provide certain information is grounds for my application to be denied.

Signature: _____   Date: _____

FOR INTERNAL USE ONLY:

Date: _____   AC Initials: _____
Animal Name(s):   _____   Animal #: _____

Adoption counseling notes attached: ___ Yes ___ No   If no, why? _____