

## The Animal Protectorates (TAPS) DOG ADOPTION APPLICATION (email to adopt@tapsusa.org or fax to 818-641-1692)

We request the following information so that we can assist you in the selection of a new Dog. This form and a consultation with a representative of The Animal Protectorates™ - TAPS are designed to help you find the Dog most compatible with your lifestyle.

## To be considered as an adopter, you must:

- \* Be 21 years of age or older
- \* Have identification showing your present address
- \* Have the knowledge and consent of your landlord (if applicable)
- \* Be able and willing to spend the time and money necessary to provide training, medical treatment and proper care of the Dog.

## The necessary steps in order to complete the adoption process are as follows:

- 1. Fill out adoption application
- 2. Consultation/Interview process with a representative of The Animal Protectorates™ TAPS
- 3. Home check by The Animal Protectorates TAPS (read about why we conduct homechecks at http://www.tapsusa.org/home-checks.html)
- 4. Adoption Contract signed
- 5. Animal placed in your home
- 6. Immediate adoption or 4 day foster/ trial period
- 7. Pay adoption fee (read about our adoption fee at <a href="http://www.tapsusa.org/adoption-fee.html">http://www.tapsusa.org/adoption-fee.html</a>)

## COMPLETION OF THIS APPLICATION DOES NOT GUARANTEE ADOPTION OF A DOG.

\*denotes required

(If the required field is "not applicable" please put NA and move to the next question.)

Name of Dog you are apply	ying to adopt:*		
Description of Dog you are	applying to adopt:*		
Your First Name:*	Your Last Name:*	Age:*	Occupation:*
Spouse/Significant Other* First Name:*	Last Name:*	Age:*	Occupation:*
Email:*			
Best phone number to rea	ch you:*		
Alternate phone number:			
Where do you live? *HouseApartment _	CondoMobile Home	Other	
Home address:*			
Mailing address (if differer	nt):		
Do you own or rent your h OwnRent	ome? *		
If you rent, may we contac YesNoDoesn't ap	t the owner to obtain perm ply	nission for this D	og to live in your home?
Owners name and phone r	number: *		

How many adults are in your household? *
How many children are in your household (and ages)? *
Do you or anyone else in your household smoke?YesNo
If you or anyone else in your household smokes, where do you smoke?InsideOutsideDoesn't Apply
Does anyone member or your household have an allergy to Dogs? *YesNoOther
Is everyone in your household ready for a new pet? *YesNoOther
This pet will be for: *MeFamily PetGiftOther
Primary caretaker of this pet will be: *MeSpouse/Significant OtherChild(ren)Maid/HousekeeperOther
Why do you want this Dog? (check all that apply) *CompanionCompanion for other petHouse PetWatch dogGuard dogHuntingPersonal protectionOther
What type of personality are you looking for in this Animal? *
Will this be your first Dog? *YesNo

What kinds of pets have you had in the past? *Dog(s)Cat(s)Horse(s)Other
Which of these pets do you still have? (Include age, sex and breed.) *
Are your current pets all spayed or neutered? *YesNoDon't know
Are your pets current on vaccinations? *YesNoDon't know
If you have pets, will he/she/they adjust to a new Dog in the house? *YesNo
Please explain how your pets will adjust to a new Dog in the house: *
Have you ever sold or given away a pet?* please explain:YesNo
Have you ever turned a pet in to a shelter? *YesNo
If you have turned a pet in to a shelter, please explain: *
Have you ever had a pet euthanized? *YesNo

ii you have had a pet euthamzed please explain.
Was your last Dog obedience-trained? *YesNoDoesn't apply
Is someone home during the day? *YesNo
If someone is home during the day, who? *
How many hours each day will the Dog be without human companionship? *
Please explain: *
This pet will live: *Indoor onlyMostly indoorMostly outdoorOutdoor only
Percentage of time allowed outside each day (%): *
Do you have a completely fenced yard? *YesNo
What kind of fence? *
Height of fence: *
If no fenced yard, please explain: *

Do you have gates? *YesNo
If you have gates do they lock with a padlock/deadbolt? *YesNo
Do you have a dog door? *YesNo
Do you have a pool? *YesNo
If yes, is there a fence around the pool? *
Do you have a balcony? *YesNo
If you have a balcony is it pet-proof? *YesNoDon't know
Do you have unscreened windows? *YesNoDon't know
Do any of the following have regular and/or unsupervised access to your home? (check all that apply) *Maid/HousekeeperHandymanPool ManGardenerNeighborhood childrenFriendsLandlord/Property ManagerOther
Please explain why you are comfortable allowing this and how you would prevent a pet from accidentally getting out:

Are there times when the Dog will be tied up? *YesNo
Are there stairs that lead to your home? *YesNo
If yes, how many?
Will the Dog spend any time in the garage? *YesNo
If yes, please explain:
If your new Dog/Puppy is not housebroken, what method will you use to train him/her? *
Where will the Dog be kept during the day? *
Where will the Dog sleep? *
Are you able and willing to exercise the Dog on a regular basis? *YesNo
Methods of exercise?

Pet will be secured while outside using a: *Leash and Collar/HarnessDog run/KennelPet CarrierAllow Free Roam in Yard
If you drive a pickup truck, would you allow the Dog to ride in the back? *YesNo
Will you keep the Dog up-to-date on vaccinations? *YesNo
How often do your current pets visit the veterinarian? *
Name of veterinarian: *
Address of veterinarian *
Phone number of veterinarian: *
Years you have been a client there? *
Do you authorize us to contact your Veterinarian for a reference? *YesNoDon't knowI don't currently have contact with a Veterinarian
If you go away for a few days, or on a vacation, who will take care of the Dog? *
If you move, will you take the Dog with you? *YesNo
Please explain: *

How much are you willing to spend on medical bills for your Dog? * Up to \$100Up to \$500Up to \$1,000Up to \$5,000Whatever it takes
What would you do if the vet bills went over this amount? *
Are you willing to have a representative from The Animal Protectorates - TAPS come to see where the Dog will be living? *YesNo
If No, please explain: *
Are you willing to take responsibility for this Dog for the next 10 to 15 years? *YesNo
If No, please explain: *
What would you do with the pet if:
The pet damages/destroys something highly treasured by you, your family or friends? *
You find it necessary to move to another home that does not allow pets? *
You plan to get married? *
Plan to start a family? *
A roommate, spouse/significant other, child(ren), family or friends were suddenly allergic to this pet? *
The pet were to suddenly become destructive, act strangely, and not be happy in your home anymore, even after many years living with you? *
You suddenly had life changing circumstances that made it difficult and or/impossible to care for this pet? *

Please note: adoptions are not approved on a first-come, first-served basis, and completing this application does in no way guarantee adoption of any animal. This form is used for screening of potential adopters for our rescued pets, and as our first step in getting to know you, your home, family members, lifestyle, and your level of experience with pets. We place many hours into rehabilitating our rescued pets to make them suitable candidates for adoption. Each pet differs from one another in looks, personality, specific needs, health, and prior experiences. It is our job to ensure our rescued pets are properly matched up with homes where their chance at a 'forever placement' is greatest. Please understand the average dog can live over 10 years, cat into their late teens and early 20's, and horses into their late 20's and early 30's. Many factors influence a pet's lifespan. It is our policy to ensure that each person who adopts a pet is aware of the responsibilities of pet ownership. We have fostered these animals in our homes, and this is our opportunity to get to know you as a potential home and to assist you in selecting a pet that would best suit you and your home environment. You are making a major commitment when you adopt a pet. IF YOU ADOPT AN ANIMAL FROM US YOU UNDERSTAND AND AGREE THAT IF YOU ARE NO LONGER ABLE TO CARE FOR THE ANIMAL THAT YOU WILL CONTACT THE ANIMAL PROTECTORATES PRIOR TO TAKING ANY ACTION AND FAILURE TO DO SO WILL BE DEEMED A BREACH OF THE ADOPTION CONTRACT.

By signing below, I certify that I have read and understand all of the questions on this form. I have answered all questions on this form as truthfully as possible. I understand that if I have purposefully answered any of the questions untruthfully, I may be committing a felony and may be prosecuted to the fullest extent of the law and additionally shall return my pet to The Animal Protectorates - TAPS if the adoption was finalized.

I agree to all of the a YesNo	bove terms: *	
Signature	date	Drivers License#/Issuing State