

CITY OF PASADENA ANIMAL CONTROL & ADOPTION

Cat ADOPTION APPLICATION Cat

Thank you for considering adoption and wanting to save lives. We really do appreciate it and will do our best to make sure the animal you are looking at will be the perfect match for your family. In doing so, this application does not mean you will definitely get the animal you look at. Applicants must be at least 18 years of age.

**** /

How did you hear about us?	Y
Animal ID number 2 nd Choice	
Name:	Phone number:
Email:	Alternate number:
EITIGII.	Allemate number.
Would you prefer to be contacted by phone	e or email? Phone Email (circle one)
List the NAMES and AGES of all the people re	esiding in your home INCLUDING YOUR AGE.
and Acts of diffine people to	in your norne including rook Act.
Is everyone in agreement with this adoption Have your children been taught how to trea	? Yes or No It animals with respect and kindness? Yes or No
Address:	
(Street address)	(City) (State) (Zip)
Do you live in an apartment? Yes or No	If yes; Have you paid your pet deposit? Yes or No
Apartments' Name:	Apartments' phone number:
Does your apartment have any restrictions?	(Weight or breed)
Please note that we will call to verify with the	e apartments that it is ok you adopt this animal.
1111	
	e one: Rent or Own <mark> If you own we verify online</mark>
Landlords' name:	
Does your landlord have any restrictions?	
Please note that we will call to verify with the	e landlord that it is ok you adopt this animal.
Do you plan to let your new cat outside? Ye	s or No
If yes, please explain what you will do to kee	
Would you book with an amployee of the st	poltor doing a home check? Yes or No
Would you be ok with an employee of the st If "No", please explain why.	iener donng a norme checké też or ivo
· 1 /	

What preparations h	nave you made	or will yo	u make for	your new pet? _	
Who will have prima Are you financially a	ry responsibility Ible and willing	for your r	new pet? or your new	pet if it became	e ill or injured? Yes or No
Please describe the pecial needs now c					l your new pet have
lave you ever owner f no, explain any res				pet:	
		1			1/2
C 1 1: 4			710		
f yes please list your p Pet name	Status	Age	Туре	Breed	Gender Spayed or neutered
= = = = = = = = = = = = = = = = = = = =					3 P 1 7 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			/		
1-5	T				180>1
/ E	· · · · · ·				1033
	TEG B				
					7 :
lave you ever had t	to give up an e	unimal for	any roason'	2 Vos or No	N E
fyes, please explair			arry reasons	res or No	<u> </u>
	/ /			> // <	≥ /:
Are your pets on hed	artworm prever	ntative? Y	es or No		
f yes, what type?					
Please describe you	r personal k <mark>n</mark> ov	vledge of	the cause of	and prevention	of heartworms:
		1111111		11111111	
Please provide a list of Name	f any veterinariai		s that have so	een your pet(s):	Phone number
Hame	Addiess			Phone number	

You may need to litter-box train your new pet. What is your training method?
Can you invest the time and effort to allow this pet to adjust to its new home? Yes or No How long are you willing to invest in this?
What would you consider a valid reason that you would give up a pet?
Please describe what you will do if this pet demonstrates any of the following behaviors: Clawing the furniture:
Not using the litter-box:
Not getting along with other pets:
Difficulty adjusting to household:
How long would you give this pet to change its behavior with additional training?
f needed, how would you discipline your pet?
How many hours a day will your new pet be left alone? Where will this pet stay while it is home alone?
Where will this pet sleep at night?
Who will care for your pet if something happened to you? f this pet were lost, what would you do?
Do you realize that dogs and cats can live as long as 15 years or more? Yes or No
Are you willing to accept responsibility for a living creature that long? Yes or No
By signing below you are certifying that the above information is true. False or incomplete information may result in nullifying this adoption.
Signature Date