



Pets. Family. For Life.

WWW.ADOPTOCPETS.ORG

ADOPTION POLICY

The Pet Adoption Center of Orange County (PAC-OC) seeks permanent, loving homes where our rescued animals can live a long, happy and healthy life as part of a family. Adoptive families must agree to keep this animal as a pet and companion. The pet is to be primarily indoors in order to be a part of the family. Adoptive families must agree that pets will be confined in a securely fenced yard or restrained on a leash at all times when outdoors.

It is a condition of this adoption that should the adoption be unsuccessful for any reason, the pet is to be returned to The PAC-OC to find the right home.

Prior to adoption, all pets will be spayed or neutered, current on vaccinations, and an adoption donation will be received. The donation includes a vet evaluation, microchip, spay/neuter, appropriate vaccinations and other recommended medical treatment.

Although PAC-OC does their best to maintain a healthy environment, there are NO expressed or implied guarantees relative to the health or temperament of the animal.

The adoptive family agrees to provide a valid Drivers License; be willing to allow an authorized representative of PAC-OC to inspect the home prior to adoption; be willing to allow an authorized representative of PAC-OC to conduct an adoption follow-up; be willing and able to provide the adopted pet with proper diet, housing, veterinary care, yearly vaccinations, veterinary recommended preventative and flea treatment for the rest of its natural life; agree to comply with all City, County, State and Federal laws governing animals; read carefully the terms of our adoption agreement and be willing to agree to the terms of the contract; agree that PAC-OC has the right to remove the pet without notice if the adopting family fails to comply with any of these terms.

Special Note:

Decisions on placing pets in adoptive & foster homes are based solely on the judgment of The Pet Adoption Center of Orange County. PAC-OC reserves the right to refuse to adopt or foster to anyone without disclosing the reasons, as well as make all decisions regarding placement or final arrangements of any rescued pet in its care; whether in, or being placed in, a foster or adoptive home.

ADOPTION APPLICATION

Submitting this questionnaire does not guarantee you will be approved to adopt the animal for which you are applying. Please do not consider this an invasion of your privacy. We are doing our best to place all of our animals into permanent, responsible homes, at the same time as find a suitable pet for you. We thank you for your cooperation in taking time to fill out this form.

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

E-mail: _____

Home phone () _____ Work/cell phone: () _____

How do you prefer we contact you? Home phone Work/cell phone Email

Employer: _____

Employer's phone: () _____

Drivers License #: _____ State of Issuance: _____

Personal Reference: (please put someone outside of your home)

Name: _____

Address: _____ City: _____

E-mail: _____ Home phone () _____

Pet Interested in Adopting: _____

Please indicate all applicable reasons for wanting to adopt this pet:

Companion Watchdog Family Pet Gift Other _____

Do you live in a: House Apartment Condo Mobile Home?

How long have you resided at your current address? _____

Does your lease permit pets? Yes No Not sure

Are there restrictions? Yes No Not sure. If yes, what are they? _____

May we contact your landlord? Yes No. Name/phone of landlord/leasing office: _____

Where will this pet spend most of his/her time?

Crate Indoors Outdoors Garage Patio/Porch Other: _____

Where will this pet stay when you are not home?

Crate Indoors Outdoors Garage Patio/Porch Other: _____

Where will your new pet's main sleeping quarters be? Crate Pet Bed Share bed with owner
 Designated Room Outdoors Garage Patio/Porch

What arrangements do you plan to make for exercise and toilet duties? _____

Do you have a pool, spa, pond, or water feature? If so, describe: _____

How many people, including children, live in your home? _____

If there are children in the home, or that visit often, how old are they? _____

Who will be responsible for daily care & feeding? _____

How long will the pet typically be alone in a 24-hour period? _____

How much money do you expect to spend on this pet's care (including any medical care) in a year? _____

What arrangements do you plan to make for the pet when you travel? _____

CURRENT PETS

Please list the breed, size, age and NAMES (for verifying vet records) of all pets currently in your home:

Are they spayed/neutered? Yes No. If no, why not? _____

Are they all up to date on vaccines, including Bordetella (aka Kennel Cough)? Yes No Not sure

Are they on heartworm prevention? Yes No Not sure If so, what kind? _____

Are they on flea prevention? Yes No Not sure If so, what kind? _____

Are they licensed in your county? Yes No Not sure. If no, why not? _____

What other types of pets, if any, are currently in your home? _____

If your present living conditions changed (move, change jobs, divorce, etc), what would you do with this pet? _____

Under what circumstances would you feel it necessary to give this pet up?

Pet barks or whines Pet has a potty "accident" in the home Pet damages property (i.e. carpeting, furniture, etc) Pet becomes aggressive Pet becomes very ill You move to a different state Other (please detail): _____

Have you ever surrendered an animal to a shelter or humane society? Yes No

If so, why? _____

May we contact your veterinarian? Yes No

Name & Phone: _____

Have you ever been convicted of animal cruelty or neglect? Yes No

Any other animal-related violations? Yes No. If so, what happened? _____

EXPERIENCE WITH PETS

Do you have experience with any of the following? Please check all that apply:

Crate Training Obedience Training Raising a Litter Modifying Behavior Problems Potty Training

Please list any other experience that you feel will be beneficial in adopting one of our pets:

Are you willing to commit to a training class/program with this pet if required? Yes No Not sure

Do you understand that we rarely know whether a pet is housebroken or not, and are you willing/able to potty-train this pet if necessary? Yes No Not sure

Check types of confinement you can provide:

Crate Fenced yard Kennel run Other (please specify): _____

Describe fence or kennel size/type: _____

How do you plan to train/discipline this pet? _____

Do you or any members of your family have any known allergies to pets? Yes No Not sure

How long are you willing to give this pet to bond with you and settle in to his/her new home?

One day One week One month Other _____

If less than a month, why? _____

INITIAL EACH STATEMENT BELOW:

_____ I understand I am committing to care for this animal and have it as part of my family for its natural life, which can be up to 17 years for a pet.

_____ I am financially able to provide for the animal's needs. This includes food, supplies, shelter, veterinary care and heartworm prevention, which can be approximately \$800 per year.

_____ I have adequate time to spend with my new pet, including time for training, exercise and grooming.

_____ I understand that if I move, my pet will make the move with me.

_____ I understand that I must comply with all state and local ordinances concerning pet licensing and vaccinations.

Where did you hear about the pet you are applying to adopt? _____

All of the above information I have given is true & complete. I agree to follow the Rules and Policies of THE PET ADOPTION CENTER OF ORANGE COUNTY. I understand that it is my decision whether or not to adopt any particular pet. I will not hold THE PET ADOPTION CENTER OF ORANGE COUNTY responsible for any damage, injury, or harm caused directly or indirectly to any person or property by any pet I may decide to adopt.

THE PET ADOPTION CENTER OF ORANGE COUNTY, AT ITS SOLE DISCRETION, RESERVES THE RIGHT TO REFUSE ANY APPLICANT FOR ANY REASON OR NO REASON.

I have read the disclaimer and agree to these terms and conditions.

SIGNATURE: _____

DATE: _____

Approved by: _____ **Date approved:** _____