



SPCA Staff Use Only

Date Received: _____
<input type="checkbox"/> Driver's License
<input type="checkbox"/> Vet Recommendation
<input type="checkbox"/> Pet Interaction
<input type="checkbox"/> Home/Rent Check
<input type="checkbox"/> Phone Verification
<input type="checkbox"/> Approved <input type="checkbox"/> Denied

Adoption Application

All personal information collected on this application will be kept strictly confidential. Only completed applications will be processed by the SPCA Adoption Counselors – please make sure that all of the necessary fields are complete and accurate. Submission of this adoption application does not guarantee an adoption nor does it immediately qualify one for an adoption. Applications are accepted on a first come, first served basis. Only approved applications can secure a courtesy hold on a specific animal. Completed applications may be dropped off or mailed to the shelter at **2435 State Route 352, Elmira, NY 14903**, e-mailed to **admin@chemungspca.org** or faxed to **(607) 732-6351**. For more information or questions on a specific animal or on the adoption process, please call our adoption counselors at **(607) 732-1827, Ext. 501**.

Personal Information

Animal Name/ID Number: _____

Applicant's Name: _____

DOB: ____/____/____ Driver's License #: _____ State: _____

Current Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: (____) _____ E-mail: _____

Are you interested in receiving Chemung County SPCA E-mail updates? Yes No

Work: Employed (full/part time) Unemployed Student Retired

If employed, where? _____ How long? _____

List all family members in household (with ages):

Do you or any of your family members have any animal allergies? Yes No

Residential Information

Type of Residence: House Apartment Condo/Town House Mobile Home

Do you own or rent? Own Rent How long? _____

Do you live with your parents? Yes No

Mobile Home Park/Landlord's Name: _____

Address: _____ Phone: (____) _____

Home Location: Urban Suburban Residential Rural

Traffic Patterns: Heavy Medium Light Speed Limit: _____ mph

Will your pet run loose? Yes No When and where? _____

Where will the pet be kept? Indoors Outdoors Explain: _____

 When no one is home? Indoors Outdoors Explain: _____

 At night? Indoors Outdoors Explain: _____

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

For Dogs Only:	
Do you have a fenced in yard or area?	Yes No
If yes, what height and size? _____	
If no, how will you keep your pet confined outdoors? _____	

Pet History

Have you had pets before? Yes No Adopted from us before? Yes No
Do you still own these pets? Yes No
If no, please explain why:

Have you ever given up a pet before? Yes No
If yes, please explain why:

Please list all pets currently living in your home (type, age, gender, spayed/neutered):

Name of current/past veterinarian: _____
Address: _____ Phone: (_____) _____

General Information

Who will be the primary caretaker for this animal? _____

Reason for wanting this pet (Check all that apply):

- | | | |
|-------------------------------|--------------|---------|
| Family Companion | To Breed | Mouser |
| Guard Dog | A Gift | Hunting |
| Companion for other animal | For Children | |
| Other (please explain): _____ | | |

How long will you give your pet to adjust? _____

How will you help your pet adjust to a new home environment?

For what reasons might you need to return the pet to the SPCA?

How much do you plan to spend yearly on your pet? \$50-99 \$100-500 \$500+

Do you feel you are financially able to care for a pet? Yes No

Will you provide regular veterinary care for your pet? Yes No

What influenced your decision to adopt from our shelter?

- | | | |
|-------------------------------|------------------------|------------------|
| Adopted here before | Radio | Newspaper |
| SPCA Website | Word of Mouth | Facebook/Twitter |
| SPCA Newsletter | Offsite Adoption Event | Television |
| Other (please explain): _____ | | |

For Dog Adoptions Only:					
Will you license your dog?	Yes	No	Are you aware of dog control laws?	Yes	No
How much exercise will you provide for your dog? _____					
What types of exercise will you provide for your dog? _____					
How will you train your new dog? _____					
Do you plan on taking your new dog to dog obedience classes? Yes No					

Additional Comments/Questions:

Adoption Agreement

Please read through and mark your **initials** next to each statement; then sign the agreement at the bottom.

1. _____ I understand that the Chemung County Humane Society and SPCA Inc. (CCHS/SPCA) makes no representations whatsoever relating to the health, habits or any other fact about the animal.
2. _____ I understand that my pet may have an illness that is not immediately apparent and that the CCHS/SPCA is not responsible for veterinary care should the animal have an illness.
3. _____ I understand that there is a risk that my current family pets could be exposed to illness and the CCHS/SPCA is not responsible for their veterinary care should they become ill.
4. _____ I understand that it is recommended that my new pet be isolated from my current family pets until it has seen my veterinarian.
5. _____ I agree to call within **5 days** of the adoption to make an appointment to take my new pet to my veterinarian
6. _____ I understand that a pet needs to be seen by a veterinarian at least once a year for an animal physical, vaccinations and flea/heartworm preventatives.
7. _____ I understand that New York State Law requires written permission before releasing my new animal's medical information to anyone but me. By initialing this form and signing the agreement below, I am allowing the CCHS/SPCA to obtain all information concerning my animals from the veterinary hospital that I have provided on this application.

For Cat Adoptions Only

_____ I understand that the fatal disease Feline Infectious Peritonitis (FIP), a mutation of the more common and benign Feline Enteric Coronavirus (FEVC), is one such disease of which to make myself aware. I understand that the disease can be present in either a wet or dry form, that it occurs worldwide and that it affects cats of all ages but is most commonly found in cats up to two years of age. I will contact my veterinarian for more information regarding this disease.

By signing this document, I am accepting all of the risks associated with the handling of animals during the adoption process. I understand that this document will be retained on file by the Chemung County SPCA. I further attest that the information I have given is true and understand that giving any false or incomplete information may result in this application being denied.

Signature

Date