NEWPORT BEACH ANIMAL SHELTER CAT ADOPTION APPLICATION

Cat's Name: _____

Please answer every question in order for your application to be considered. Completing an application is not a guarantee of adoption.

Your Name: _____ Driver License: _____ State: _____

Street Address: _____ City, State, ZIP: _____

Home Phone Number: _____ Work or Cell Number: _____

Email Address: _____

Are you the head of household? Yes / No *If you answered No, the head of household must fill out the application or we cannot consider it even if you are an adult living in the home.*

Please list ALL of the pets you have had in the past 5 years and those you currently own:

Type / Breed	*Sex*	*Age*	*Neutered?*	*Licensed (dog only)?*	*Where is this pet now?* (If pet died, please list at what age and reason)

Why do you want to adopt this cat? *Please check all that apply*

☐ Personal or Family Companion ☐ Companion for Other Pet ☐ For Children ☐ Gift

Do pets currently in your household get along with cats? ☐ Yes ☐ No

Do you live in a: ☐ house ☐ townhome/condo ☐ apartment ☐ duplex ☐ mobile home

Do you: ☐ own ☐ rent/lease ☐ other Landlord Name & Number: _____

If renting/leasing, does your landlord require cat(s) to be declawed? ☐ Yes ☐ No

Are you prepared to pay any required pet deposits? ☐ Yes ☐ No

How many adults are in your household? _____ Ages: _____ How many children? _____ Ages: _____

If you do have children, have they been around cats before? ☐ Yes ☐ No

Do you have a roommate? _____ If yes, how many? _____ Has every member of your family agreed to adopting this cat? ☐ Yes ☐ No

Does any member of your household have allergies or asthma? ☐ No ☐ Yes, describe: _____

This cat will spend its time:
☐ Outside Only ☐ Inside Only ☐ Inside/Outside ☐ Outside during the day, inside at night
☐ Other _____ ☐ Inside with patio/balcony/garage access ☐ Outdoors/Garage Only

Where do you plan to keep this cat's litter pan? _____

Do you have a dog door in your home? ☐ No ☐ Yes - where does it open to? _____

How many hours will this cat be alone each day? _____

Who will care for this cat when you are out of town? _____

What characteristics are you looking for in a cat? *Please check all that apply*

☐ Active / Playful ☐ Calm ☐ Declawed ☐ Lap Cat
☐ Affectionate/Cuddly ☐ Independent Shorthaired ☐ Longhaired ☐ Medium haired
Other: _____

Do the costs of vaccinations, medical care, boarding, supplies, and/or general upkeep of your cat present any financial problems for you? ☐ Yes ☐ No (The annual cost of providing responsible care to a healthy cat is approximately $500)

How do you plan to deal with issues regarding cat clawing furniture, digging potted plants, etc?
☐ Trim/Clip Nails ☐ Declaw/tendonectomy ☐ Buy scratching post ☐ Other: _____

Are you prepared to make a commitment of 10 to 20 years to this cat? _____
If you move (locally, out of state, or out of the country) what will you do with this cat?
_____

Which reasons are acceptable for giving up your cat? *Please check all that apply*

☐ allergy ☐ marking in the house ☐ moving ☐ cat sometimes "missing" litter pan
☐ illness ☐ biting/clawing furniture ☐ too active ☐ too vocal
☐ not compatible w/other pets ☐ digging

If you did not mark any reasons, why not?
_____

Have you ever had to give up a pet? _____If so, when and why? _____

If your cat gets sick, what will you do? _____

Who is your current veterinarian? *Name & City please:* _____

Have you ever adopted animals from the Newport Beach Animal Shelter before? ☐ Yes ☐ No
If yes, do you still have the animal(s)? _____

Have you ever completed an application to adopt an animal from our shelter in the past 12 months? ☐ Yes ☐ No
If yes, which animal (name)? _____

Your application will be reviewed along with all others received by Animal Control personnel to ensure that the best home possible is selected for this animal. Animals are not adopted solely on a *first come, first served* basis. The completion of this application is not a guarantee of adoption.

Incomplete application forms are grounds for denial of adoption application. We reserve the right to refuse the adoption of any animal.

I hereby certify that the above answers are true, to the best of my knowledge, and I understand that if approved, I must sign and abide by an Adoption Agreement.

_____
Applicant Signature

****

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Accepted by: _____ Completed search for prior records: _____

Date received: _____ Time received: _____

Interviewed by: _____ Date interview conducted: _____

Comments:

☐ Recommend Adoption ☐ Do Not Recommend Adoption

Visits by applicant:

Date:

Date:

_____Approved _____Denied By: _____

Date applicant contacted: _____ ☐ In person ☐ By phone ☐ Left message

Comments: