



**Graham County Animal Control
Adoption Application**

Full Name _____

Street Address _____ City, State, Zip _____

Daytime Phone _____ Evening Phone _____

Drivers License # _____ Drivers License State _____

If you have adopted from us before, please list the pet's rescue name, and the full name of the adopter (if different from above)

Please Tell Us About Your Household:

Where do you live? House Apartment Mobile Home Other _____

Do you currently own or rent your current residence? Rent Own

Please list the names **AND** the ages of every person who lives in the home.

If you are renting, do you have your landlord's permission to adopt a pet? Yes No

To help us match animal personalities, please list all of the animals **currently** in your home, how long you have had these animals, the gender, and ages of the animals.

List the animals you cared for in the **past five years**, how many years they lived with you, and where they are now. Please do not include animals currently in your care.

If there is a particular GCAC companion in whom you are interested, what is the name of the dog or cat? _____

How would you describe your household activity level?

Have all adults in the home agreed to adopt? **Yes** **No**

Does anyone in your home suffer from allergies and/or asthma? **Yes** **No**

If yes, please elaborate how will the dog affect that household member? If your answer is that there will be no effect, please explain why. _____

If the dog will be alone for extended periods during the day, exactly how will you arrange for the dog or cat to be safe / have its bathroom needs met while you are at work?

Where will the animal stay when you are home? **Inside** **Outside** **Both**

Where will the animal stay when you are away? **Inside** **Outside** **Both**

Where will the animal stay at night? **Inside** **Outside** **Both**

If the animal will live outside, how will they stay warm during the winter months?

If the animal will live outside, how will they stay cool during the summer months?

Are you willing and able to accept full care, costs, and necessary burdens and responsibility of owning a dog or cat? **Yes** **No**

Before returning the animal, would you consult a veterinary professional or seek the help of a behaviorist? **Yes** **No**

If you were to move to a place that did not accept animals, what would you do?

Have you ever surrendered an animal to a Humane Society, Pound or Animal Control facility?

Yes No

If yes, please explain:

Have you ever placed a pet with a family member, friend or acquaintance? Yes No

If yes, please explain:

Please list two references and their phone numbers:

Please note: Answering the above questions in detail will help Graham County Animal Control determine if the animal you would like to adopt is a good match for you, based upon what you are looking for in a companion animal. We know the personalities of our animals and want to set you and your new pet up for success. Filling out this application does not obligate you to adopt from Graham County Animal Control. A background check will be run on all applicants.