



# SPRINGDALE

## ANIMAL SERVICES

<b>Staff only:</b>	Date Taken: _____	Time Taken: _____	Animal ID # _____	Date Available: _____	
	<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved	Animal Name: _____	Adopter Notified <input type="checkbox"/> Yes <input type="checkbox"/> No	Staff Initials: _____

**Applicants for animal adoption must be at least 21 years of age.**

**Please have I.D. ready to show proof of current address.**

Name of animal being considered for adoption: \_\_\_\_\_

Type of animal being considered:  Dog  Cat

Primary Adopter \_\_\_\_\_

List all adults in household by name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Driver's License Number \_\_\_\_\_ State \_\_\_\_\_ Date of Birth \_\_\_\_\_

Phone Number \_\_\_\_\_ Secondary Phone \_\_\_\_\_

Email \_\_\_\_\_

Place of Employment \_\_\_\_\_

**Housing:**

Own  Rent  Live with parents

*If living with Parents:* Parent's Phone \_\_\_\_\_ Housing Situation:  Own  Rent

If your current residence is rented, we must receive permission from the landlord. Permission from landlord must be received within 24 hours of submitting application.

Landlord Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_

**Check all that apply:**

House  Apartment  
 Fence  No Fence  No Yard

**References:**

Please provide two references, preferably not a family member who we can contact.

Name \_\_\_\_\_ Name \_\_\_\_\_

Phone Number \_\_\_\_\_ Phone Number \_\_\_\_\_

Are there children in your home?  Yes  No If yes, what are their ages? \_\_\_\_\_

- Is anyone in the home allergic to animals?  Yes  No If yes, what type? \_\_\_\_\_
- Are you:  A first time pet owner/fosterer  Owned pets in the past  Fostered pets in the past
- Will this animal be kept (**Outside means outside alone for more than 10 minutes**):  
 Inside  Outside  Both

**If Both:**

**During the day:**  Inside  Outside **At night:**  Inside  Outside

- Which of the following best describes your reasons for wanting this dog/cat? (Check all that apply)  
 Companion  Other Pet's Pal  Hunting  Camping Buddy  
 Agility Training  Jogging Buddy  Walking Buddy  Couch Buddy  
 Outdoor Yard Pal  Other (Please specify) \_\_\_\_\_
- Are you familiar with your local animal ordinances?  Yes  No
- If you move in the future, what will you do with your pet? \_\_\_\_\_
- It may take an animal two weeks to a month or more to adjust to its new home. Are you prepared to give your new pet time and help it adjust to your family? (Many pets take 1 month or more to acclimate to a home)  Yes  No
- What reason, if any, would make you want to re-home your pet? \_\_\_\_\_
- Have you considered the daily expenses for maintaining an animal? (medical, food, grooming, etc.)  Yes  No
- Are you familiar with humane procedures for housetraining?  Yes  No
- If a behavior problem arises, are you prepared to invest the time and expense for training?  Yes  No
- How much time would you give your new pet to adjust? \_\_\_\_\_
- Do you understand that the City of Springdale Animal Services makes no representations or guarantees about any animal's temperament and that any comment that an animal may be good with children or other animals or is housebroken is based upon information provided by previous owners and not a guarantee?  Yes  No
- Do you understand and agree that City of Springdale Animal Services and its Animal Shelter will not be liable for any future injury or damage that may be caused by this animal?  Yes  No
- Do you understand that City of Springdale Animal Services and its Animal Shelter makes every effort to adopt only healthy animals but makes no guarantees or representations about any animal's health and will not be liable for any future veterinary care or treatment the animal may need? Animals adopted may have been exposed to various diseases from proximity to other animals. In addition, the physical condition of some animals may be less than ideal due to conditions the animals have endured before arriving at the shelter.  Yes  No

**Please list all pets currently at home and any that you have owned in the past 5 years.**

Pet's Name	Male/ Female	Cat/ Dog	Breed	Age	Spayed/ Neutered (Yes/No)	Is (was) the pet kept inside or outside?	Owned how long?	If not still with you, what happened?

**For any animal listed above:**

**Do you have a regular veterinarian or clinic?**  No  Yes - Name and Phone:

**Previous veterinarian(s) or clinic(s)** (Name and Phone):



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## ANIMAL SERVICES

**321 Randall Wobbe Lane Springdale, AR 72764**

**P: 479-750-8166 Fax: 479-750-8508 E-mail: [ckremer@springdalear.gov](mailto:ckremer@springdalear.gov)**

1. Applicants for animal adoption must be at least 21 years of age.
2. Explain beside any question not answered why it isn't answered.
3. Applicant must agree to abide by all the city animal ordinances.
4. All dogs and cats three months and older are required to be spayed or neutered before the animal goes home with adopter. For animals under the age of three months adopter will pre-pay spay/neuter fee and will be given a voucher to have surgery done when animal is old enough. Spay/neuter must be done by the date on voucher.
5. Applicants with young children will be evaluated based on the compatibility between the child and animal, which will be evaluated by Animal Shelter staff prior to adoption.
6. If for any reason the adoption is not successful or the owner cannot keep the pet, we can take your pet back with a surrender appointment. Our appointments can run between 2-8 weeks ahead. ***You must make a surrender appointment to bring your pet back.***
7. Animals are placed as companion animals, not as guard dogs and typically not as mousers. We prefer strongly that your new pet will be kept inside your house and made a part of the family.
8. If applicant owns other animals, they must be current on vaccinations, including rabies vaccination which must be done by a licensed veterinarian.
9. Animals are generally not adopted to applicants having a history of ordinance violations, losing, giving away, selling animals or having animals injured or killed by moving vehicles.
10. Verifiable and secure photo identification is required at the time of application and adoption.
11. An animal ***will not*** be adopted to applicants providing false information on the adoption application.

***I agree to the above requirements and wish to adopt a pet.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_