



Welcome dog Korea
 E-mail : welcomedogkorea@naver.com
 +82 10 4880 9474

PET ADOPTION APPLICATION

ADOPTOR(S) NAME(S) Jennifer M. Holowaty

DATE OF BIRTH(S) 05 May 1975

ADDRESS 451 Catherine St CITY Port Erin ZIPCODE NOH20

PHONE 519 708 0351 E-MAIL jholowaty@hotmail.com

Name of pet of your interest : Soony

Type of Residence : House Apt Condo Mobile home

Do you : Own or Rent

If you are renting does the landlord allow pets? Yes No

Please provide the name and contact number for the management for verification
Kurt Janke (519) 797-1307

Number of adults (18+) in the household : 1 Relationship to adopter : SON

Are all adults in the household in favor of the adoption? Yes No

Number of children (under the age of 18) in the household : 0 Age(s)

Are any of the household members allergic to dogs? Yes No

In the event of an emergency, what is the estimated vet bill you can afford? \$ 2-5K

Type of fence : wooden solid Height of the fence : 7 feet

The dog will stay : Indoors Outdoors Both

Have you owned a pet before : Yes No Currently own

If you answered "Yes" above and no longer have the pet, please explain what happened.

If "Yes" above and you currently own a pet, please state type/breed, personality and age of pet.
2 maine coone cats 3 yrs old.





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Do you have other pets? Yes _____ No _____ Dog _____ Cat Bird _____ Other _____

If the other pet is a "Dog", it is spayed/neutered? Yes _____ No _____

If you answered "No" above, please explain why. : _____

Do you have a primary vet? Yes No _____

If you answered "Yes" above, please provide name and address
South Hampton Pet Hospital

May we contact them? Yes No _____

If you answered "No" that you don't have a primary vet, please explain.

Where will the dog sleep? _____

How long will the dog be left alone in a regular day? 2-3 Hours.

What kind of experience do you have with dogs and which breeds? lots of experience
large breed dogs - Husky / Chinese Mt. Dog
Mastiff / Rottweiler

Other factors you feel should be considered _____

I certify that the information I have provided on this form is true, correct, and accurate. I am financially and physically able to care for the animal that I adopt. I understand and agree that falsification of any of the above information is grounds to disqualify my adoption application and nullify all adoption(s) and/or adoption agreement. I understand that there is no obligation to adopt an animal to me, now or in the future. I understand that all applications are reviewed on a first-come basis however, WHDR will ultimately select the best applicant to pet union. With respect to privacy of other applicants and possible disclosure of other pertinent information that may be "private", WHDR reserves the right not to disclose the details of applicant selection. _____ Initials I understand that my signature below is valid as a means of legal signature for the purpose of this adoption application. I have read and understand the agreement.

[Signature]
SIGNATURE

07/20/2018
DATE

Would you like to receive newsletters and future update from the rescue? Yes _____ No _____