

PET ADOPTION APPLICATION

ADOPTOR(S) NAME(S) Ji Eun Pak

DATE OF BIRTH(S) 10/31/1969\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_337 First Ct.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CITY \_\_Danville, VA\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIPCODE 24541\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE \_\_\_\_\_\_434-228-6622\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-MAIL jaine1031@yahoo.com\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of pet of your interest : \_\_\_Happy\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Residence : House x\_\_\_\_\_\_ Apt \_\_\_\_\_\_ Condo \_\_\_\_\_\_ Mobile home \_\_\_\_\_\_

Do you : Own \_\_x\_\_\_\_ 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

434-228-6622

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Number of adults (18+ ) in the household : \_3\_\_\_\_\_ Relationship to adopter : \_Mother\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Number of children ( under the age of 18 ) in the household : \_\_1\_\_\_\_ Age(s) \_\_\_\_\_\_\_\_\_\_\_\_17\_\_\_\_\_\_\_\_\_

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

In the event of an emergency, what is the estimated vet bill you can afford? $\_\_\_\_\_Any\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of fence : Wood & Wire fencing\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Height of the fence : \_\_\_7\_\_\_ feet

The dog will stay : Indoors. x\_\_\_\_\_ Outdoors \_\_\_\_\_\_ Both \_x\_\_\_\_\_

Have you owned a pet before : Yes \_x\_\_\_\_\_ No \_\_\_\_\_\_ Currently own \_4\_\_\_\_\_

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

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If "Yes" above and you currently own a pet, please state type/breed, personality and age of pet.

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Do you have other pets? Yes \_\_x\_\_\_\_ No \_\_\_\_\_\_ Dog \_\_x\_\_\_\_ Cat \_\_\_\_\_\_ Bird \_\_\_\_\_\_ Other \_\_\_\_\_\_

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

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

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Do you have a primary vet? Yes \_x\_\_\_\_\_ No \_\_\_\_\_\_

If you answered "Yes" above, please provide name and address.

\_Animal Center, Danville Va, 24541\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

May we contact them? Yes \_\_x\_\_\_\_ No \_\_\_\_\_\_

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

Where will the dog sleep? \_\_In the house\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long will the dog be left alone in a regular day? \_\_0\_\_\_\_ Hours.

What kind of experience do you have with dogs and which breeds? \_\_\_\_\_\_4 dogs, 5 years. 2 golden retrievers, 1 tiger jindo, 1 chihuahua/poodle mix.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Other factors you feel should be considered \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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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, \_JP\_\_\_\_\_\_\_ 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.

\_\_\_\_\_\_\_\_\_Ji Eun Pak\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_7/1/2018\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SIGNATURE**  **DATE**

Would you like to receive newsletters and future update from the rescue? Yes \_\_x\_\_\_\_ No \_\_\_\_\_\_