

# Paws Place Dog Rescue

A no-kill, non-profit animal rescue, rehabilitation and retirement facility  
3701 E Boiling Spring Road, Winnabow, NC 28479  
(910) 845-PAWS

## PRE-ADOPTION APPLICATION

Welcome to Paws Place Adoption Program. We're glad that you are interested in adopting a new pet from us. The following information is requested so that we can assist you in the selection of a new pet. The application process and consultation with a Paws Place representative is designed to help **us determine if the adoption is in *the animal's best interest***, and to assist you in finding an animal ***most compatible*** with your lifestyle. Please fill out and give to a Paws Place representative, or mail this form to Paws Place Dog Rescue, 3701 E. Boiling Spring Road, Winnabow, NC 28479 (to fax – (910) 845-8622).

### **NOTE: Conditions to assure a successful adoption:**

- **Have a vet recommendation. We will call your vet to see if the dog you had/have is: up-to-date on shots, spayed or neutered, and on heartworm preventative medication.**
- **Be at least 21 years of age.**
- **Fenced back yard is preferable and required for some dogs.**
- **Own your own home, or rent for at least one year at the same address.**
- **Have consent of your landlord if renting, and provide verification of such consent from landlord.**
- **Provide a driver's license at application time that matches your current address.**
- **Be able and willing to spend the time and money necessary to provide training, medical treatment, and proper care for a pet.**

**Completion of this application does not guarantee adoption of a Paws Place dog.** Please print

Name of Applicant: \_\_\_\_\_

Physical Street Address: \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Area Code and Home Phone #: (\_\_\_\_\_) \_\_\_\_\_ Cell # (\_\_\_\_\_) \_\_\_\_\_

Describe in detail the dog(s) you are looking for: \_\_\_\_\_

\_\_\_\_\_

Would this be your first dog? \_\_\_\_\_ What kind of dog(s) have you had in the past? \_\_\_\_\_

Which of these do you still have - include name, age, sex and breed:

\_\_\_\_\_

\_\_\_\_\_

Are there cats in the household? \_\_\_\_\_ How many? \_\_\_\_\_

Have they been spayed or neutered? \_\_\_\_\_

If not, why not: \_\_\_\_\_

What happened to the ones you no longer have? \_\_\_\_\_

\_\_\_\_\_

If you have other pets, will they/it adjust to a new dog in the house? \_\_\_\_\_

Why do you want this animal?

- Personal/family companion     Companion for other pet     House pet     Watchdog  
 Guard dog     Hunting dog     Personal protection     Other (please explain)

How many adults are there in your family? \_\_\_\_\_ How many children? \_\_\_\_\_

Children's ages: \_\_\_\_\_

Does any member of your household have an allergy to animals? \_\_\_\_\_

How many hours each day will the dog be alone? \_\_\_\_\_ Explain: \_\_\_\_\_

Which do you live in:  House     Apartment     Condo     Townhouse     Mobile Home     Other:

Do you own or rent your home?  Own     Rent

If you rent, please provide documentation that you have the owner's permission for this dog to live in your home.

Are you financially able to provide monthly heartworm & flea preventative? \_\_\_\_\_

Who was or is your veterinarian (clinic name)? \_\_\_\_\_

City/Town: \_\_\_\_\_

May we call your veterinarian to get a recommendation? \_\_\_\_\_ tel # (\_\_\_\_) \_\_\_\_\_

If you are active military, who will **guarantee** long-term care of your pet until you return from duty?

How: \_\_\_\_\_

Are you willing to have a representative of Paw's Place come to see where the pet will be living? Y / N

Do you have a completely fenced yard? \_\_\_\_\_ Height of fence: \_\_\_\_\_

What kind of fence? \_\_\_\_\_ Is there a gate to the outside? \_\_\_\_\_

Would you be able and willing to exercise the dog on a regular basis? \_\_\_\_\_

Where will this pet be kept during the day? \_\_\_\_\_

During the night? \_\_\_\_\_

Do you drive a pickup? Yes / No. Do you (or did you previously) allow a dog to ride in the back? Yes / No

Method: \_\_\_\_\_ loose \_\_\_\_\_ chained \_\_\_\_\_ tied \_\_\_\_\_ crated

Would you allow your new pet to ride in the back of a pickup? Yes / No

Comments by applicant: \_\_\_\_\_

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
Date

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TO BE FILLED OUT BY PAWS PLACE AFTER CONSULTATION

Application for adoption     Accepted     Denied

Comment: \_\_\_\_\_

Applicant Notified:     Phone call     Consultation

Paw's Place Representative: \_\_\_\_\_ Date: \_\_\_\_\_