



ANIMAL CARE & PROTECTIVE SERVICES

City of Jacksonville
2020 Forest Street
Jacksonville, FL 32204
904-255-PETS



Animal Care & Protective Services
NEVER STRAY FROM HOPE.

ADOPTION APPLICATION

Thank you so much for wanting to adopt a homeless animal from our shelter. Our application process helps us to unite suitable animals with permanent responsible homes, and your Application will help us to determine whether the proposed adoption is in the best interest of both the animal and your household.

Name: Home phone: Work phone:
Age: Sex: Driver's license (state and #):
Address: City: State: Zip:
Employer: Employer's business phone:
Your family veterinarian's name, clinic and phone:

Specific animal desired: dog puppy cat kitten
sex color breed approx. age I.D., serial # other description

Please answer the following questions carefully and completely. If we can help you answer anything, please ask us. Your signature at the end of this Adoption Application will certify that you have read and understood all of the questions.

- 1. yes no Have you or has any member of your household ever been convicted of cruelty to animals?
2. yes no Would someone else be the owner of the adopted animal?
3. yes no Does a lease agreement with a landlord prohibit your having an animal...
4. yes no Is there any pet deposit, security deposit, or other relevant required fee...
5. yes no Have you or has any member of your household been issued a citation...
6. yes no Do you or does any member of your household own an animal...
7. yes no Has a dog or cat in your household ever run away?
8. yes no Has a dog or cat in your household ever been poisoned or hit by a car?
9. Please check the relevant reason(s) why you wish to adopt the animal described above:
10. yes no Would the adopted animal live in a place of business or in a group home?
11. You live in a: house apartment mobile home duplex other:
12. If you rent, what is the name and telephone number of your landlord or rental agency?
13. The address you have given as your home is your permanent temporary residence.
14. yes no Are you a student who lives at the above address only during the school year?
15. yes no I serve in the Armed Forces and may be transferred.
16. yes no Are you planning to move within the next six months?
17. If you move, what will you do with your animals?
18. How many adults are there in your household?
19. How many children are there in your household, and what are their ages?
20. yes no Is everyone in your household aware of and in favor of your intention to adopt an animal?
21. yes no Is anyone in your household allergic to animals?
22. yes no Would an adult be home during the day?

23. How many hours a day would the adopted animal be alone? _____
24. ___ yes ___ no If your household already has any animals, do any of them live outside or in a garage?
If "yes", please explain: _____
25. ___ yes ___ no Would the animal you wish to adopt be kept outside?
26. ___ yes ___ no Does your home have a securely-fenced yard?
If "yes", height of fence: _____ type of fence: _____
27. Where would the animal sleep at night? _____
28. What would you do with your adopted animal when you went on vacation? _____
29. Species, sex, and age of each animal already in your household: _____

30. ___ yes ___ no If your household already has any dogs or cats, is each of them spayed or neutered?
If "no", explain for each non-spayed-or-neutered dog and cat: _____

31. ___ yes ___ no If your household already has any dogs or cats, is each of them over four months of age inoculated against rabies, licensed with the City, and wearing current City license-tags?
If "no", explain for each relevant animal: _____

32. ___ yes ___ no Are you aware that inoculations and routine preventative veterinary care for the animal you wish to adopt can cost between \$40 and \$120 per year?
33. ___ yes ___ no Has a dog died on your premises of distemper, parvovirus, unknown causes in the past three months?
34. ___ yes ___ no Has a cat died on your premises of distemper (panleukopenia), leukemia, or unknown causes in the past three months?
35. ___ yes ___ no Have you ever adopted a dog or cat from an animal shelter before?
If "yes", when, what animals, and where are they now? _____

36. ___ yes ___ no Have you ever brought an animal to an animal shelter?
If "yes", explain: _____
37. ___ yes ___ no Are you willing to comply with all local and state laws concerning inoculation, licensing, tagging, running at large, nuisances, and other animal-regulation issues?
38. ___ yes ___ no I would allow an authorized representative of Animal Care and Protective Services to inspect my premises during reasonable hours before adoption to verify information reported in this Adoption Application and the adopted animal's living quarters during reasonable hours after adoption to verify that the provisions of my Adoption Contract are being followed.

I certify the following by my signature: (1) that the information provided above is correct and complete to the best of my knowledge, (2) that I understand that entering false information knowingly would constitute a breach of the Adoption Contract and subject me to Animal Care and Protective Services' requiring me to surrender the animal, and (3) that I give permission for an authorized representative of Animal Care and Protective Services to inspect my premises during reasonable hours before adoption to verify information reported in this Adoption Application and after adoption to inspect the adopted animal's living quarters during reasonable hours to verify that the provisions of my Adoption Contract are being followed.

Signature: _____ Date: _____

FOR OFFICIAL USE ONLY

Date and time completed application was submitted: ____ / ____ / ____, ____ : ____ a.m. p.m.

Signature of Adoption Counselor receiving application: _____

Date of signature: ____ / ____ / ____

Application: ____ approved / ____ denied Signature of ACPS Superintendent or designee: _____

Animal adopted: ____ yes / ____ no

Contract #: _____

Remarks: _____

