



Mobile County Animal Shelter Adoption Application

(ALL APPLICANTS MUST BE 19 YEARS OLD AND UP)

PLEASE PRINT CLEARLY

Applicants Name: _____ Date of Birth: _____ Driver's Lic. #: _____

Current Address: _____

City: _____ State: _____ Zip Code: _____

Phone #: (____) _____ Work #: (____) _____ Alternate #: (____) _____

Email address: _____

City Resident County Resident Other County Out of State

Do you: Rent Own How long have you lived at the address listed above: _____

Previous Address (if less than 2 years at the current address): _____

Please complete the portion below if you are currently renting:

Manager or Landlord name: _____ Phone #: (____) _____

If you are renting, does your lease allow pets? _____ If so, is there a weight restriction? _____

Are you required to pay a pet deposit? _____ If so, has this been paid? _____

ABOUT THE HOUSEHOLD:

Number of Adults: _____ Number of Children: _____ in your household. Ages of children: _____

How busy is your household? Quiet Some Activity Lots of Activity

Do you have any other pets? Please describe: _____

Are your pets current on their Rabies Vaccination? _____ Can you provide proof of this vaccination? _____

What veterinarian administered the Rabies Vaccine to your pets? _____

Have your current pets been spayed or neutered? _____

How many pets have you owned as an adult? _____ dogs _____ cats

How long did you have these pets and what happened to them? _____

What drew you to this particular animal that you are interested in adopting? _____

Have you ever owned this breed before? Yes No

Have you ever owned a puppy or kitten less than 6 month old before? Yes No

What are your reasons for adopting this animal? (Check all that apply)

CHILDREN'S PET COMPANION FOR SELF/FAMILY MOUSER HUNTING DOG WATCH/GUARD DOG GIFT



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How many hours will this animal be kept outdoors? _____

Where will the animal sleep? _____

When outside, how do you intend to keep the dog on your property? (Check all that apply)

FENCED YARD

LEASH

FENCED PEN

TIE-OUT

Do you have (or do you have plans for)?: FENCED YARD

DOG RUN

DOG HOUSE

CRATE

All Alabama residents are required to keep their dogs confined at all times. By ensuring confinement you are protecting your pet and neighbors as well as abiding by State Laws.

Have you previously adopted an animal from the MCAS? Yes No

Have you or anyone in your household been issued a citation or had an animal impounded by the Mobile County Animal Control Department? Yes No If yes, under what name(s): _____

Reason for Citation: _____

Are you able to provide the necessary care for your adopted pet, in accordance with the state statute and the county ordinance? Yes No If no, please explain: _____

Complete this sentence: I need an animal who will tolerate being alone _____ hours a day.

What is your plan for your pets in the case of a Hurricane Evacuation? _____

I HEREBY CERTIFY AND AFFIRM THAT THE ANSWERS GIVEN ABOVE IS ACCURATE AND TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I FURTHER ACKNOWLEDGE THAT MOBILE COUNTY ANIMAL CONTROL MAKES NO WARRANTY IN REGARD TO THE HEALTH OR CONDITION OF ADOPTED ANIMALS. I FURTHER ACKNOWLEDGE THAT ADOPTED ANIMALS MAY HARBOR A CONTAGIOUS DISEASE THAT MAY BE TRANSMITTED TO OTHER ANIMALS I MAY OWN. I THEREBY HOLD HARMLESS, MOBILE COUNTY FROM ANY REPERCUSSIONS ASSOCIATED WITH THIS ADOPTION.

PRINT NAME

SIGNATURE

DATE

FOR OFFICE USE ONLY: APPROVED REJECTED

COMMENTS: _____

REASON FOR REJECTION: _____

PRINT NAME

SIGNATURE

DATE

Animal ID #: _____ Intake #: _____ Receipt #: _____ Time: _____