

City of Montrose Animal Services Adoption Information and Application

The purpose of the City of Montrose Animal Services adoption program is to find responsible, lifelong homes for animals that are suitable as family companions. Making such matches requires us to know the needs of the animals to be placed and that of their prospective adopters. We want to ensure that the animal will not be placed in a home where it may fail to be provided adequate food, water, shelter, veterinary care, and companionship. We also want to ensure that the animal is not placed with owners who allow them to roam the neighborhood, violate animal control laws, or reproduce adding to the community's burden of unwanted animals.

The City of Montrose Animal Services follows certain guidelines when considering an applicant for adoption of a pet. Some items that are taken into consideration are: adopter suitability for specific pet, adopter's history of animal ownership, reason for wanting to adopt, suitable confinement, and children in the household and their ages. The City of Montrose Animal Services reserves the right to refuse to adopt an animal based on our adoption policy. The City of Montrose Animal Services does not adopt pets to be used as gifts.

Before adopting any animal, The City of Montrose Animal Services asks that you consider your ability to provide the animal its basic needs, including food, shelter, companionship, veterinary care, grooming, training, and exercise. Special requirements of the breed and its suitability to your household should also be considered.

Please read the following carefully:

- 1. I understand that the City of Montrose Animal Services cannot guarantee the health and temperament of this or any animal. (Please take the time to make your selection carefully).
- 2. I understand the vaccination of rabies and licensing of this dog and all other dogs in my household is required if I live within the City of Montrose city limits.
- 3. I agree to comply with all animal ordinances in the City or County in which I reside in.
- 4. I understand that the adoption contract is binding and will be enforced.

Adopter Signature	Date	
Shelter Staff Signature	Date	_

Name:					
Email address:					
Mailing Address:					
City:		_ St	tate:	Zip Code:	
Home Phone:			Cell Phone:		
Employer			Work Phone:		
Are you at least 21 years old?	yes	no	Birthdate:		
Address of your residence:					
House Apartment	Othe	r:			
How long have you lived at this	resider	າce?			
If you rent, are you allowed to h	iave pe	ts at th	ne rental?	yes	no
Landlord Name		Lan	dlord Phone #		
If you have to return the pet	: becaı	use th	e landlord does i	not allow pe	ets, you
will be required to pay a reli	nquish	ıment	fee to return the	e animal.	
Will you keep this pet: indoo	ors		outdoors	both	
What is your method of contains	ment fo	or the p	et you plan to ado	pt? (Fence, k	kennel,
etc.)	40	<u> </u>			· · · · · · · · · · · · · · · · · · ·
	0/-				
Have you adopted from the City	of Mor	ntrose <i>i</i>	Animal Shelter or a	ny other anii	mal shelter
before? yes no					
If yes, when did you adopt, and	•		ave the pet you ad	•	
Have you relinquished a pet to t	he City	of Mo	ntrose Animal Shel	ter or any otl	her animal
shelter before? yes	no				
Who is your veterinarian?					
,					
How often do you take your anii	mals to	the ve	eterinarian?		

Please list the animals that currently live with you:

Species	Breed	Sex	Age	Is this animal current on rabies/license?
				170

	The state of the s
Number of children in the household and their ag	ges:
Is everyone in the household aware that you are	considering pet adoption? Yes No
If no, please explain:	The state of the s
Are you prepared to care for this animal her/his eyears) yes no	entire lifetime? (up to or beyond 20
If you move, will you take the pet with you?	no yes
Have you ever had any animal control violations?	no yes
If yes, please explain:	
If you do not reside in the City or County of Mon	trose, please provide the name and
phone number of the Animal Control agency in the	ne city or county you reside in.
So that we can determine what is effective adverus how you heard about us.	tising for our adoption pets, please tel
Are you a veteran? Yes No	
I verify that I have answered the above question	s truthfully and accurately.
Adopter Signature	Date

For Staff Use Only:

Adopter's DL#:	<u>D.</u>	O.B:
Name checked in-house:	☐ record found	☐ no record found
Does address on DL match	address on application	n? yes□ no □
If no, can applicant show p	proof of new address?	yes □ no □
Comments/explanations of	answers:	
Adoption Approved:	□ Yes □ N	·
If no, explain:		
		AFI
Staff Initials	D	ate
Follow-up call made by:	OLICE DE	Date:
CITY OF MONTHPC		