

**Jefferson County Animal Control** 161 Poor Farm Rd Kearneysville, WV 25430 Phone: (304) 728-3289 Fax: (304) 728-4889



## **ADOPTION APPLICATION**

Name:				
Current Address:				
Previous Address (if less than 6 mont	ths at current address):			
City:	State:	County:	Zip:	
Email:				
Home Phone Number:				
Work Phone Number:				
Cell Phone Number:				
Names of all persons over 18 liv	ring at your residence:			
Length of time at current addres	s:			
Place of Employment:				
Age(s) of children in household:				
Is anyone in your home allergic	to animals?			
If yes, explain:				
In what type of housing do you				
Do you rent or own?				
If you rent, are pets allowed?				
Name of Current Landlord:				
Landlord's Phone Number:				

In Ticket and Case Number of dog you are interested in adopting:			
Why are you interested in adopting this dog?			
Do you currently have pets at home? ☐ Yes ☐ No			
If yes, please list all pets currently in your residence:			
Where do your current dogs stay?			
Please list all previous pets and why you no longer have them:			
r lease list air previous pets and why you no longer have them.			
Name and number of current veterinarian:			
Name and number of animal control agency for your address:			
Where will the dog you are planning to adopt stay?			
Daytime:			
Nighttime:			
Is anyone at your house during the day? $\square$ Yes $\square$ No			
If no, how long will the dog be left alone during the day?			
Will you be using a crate? □ Yes □ No			
Explain:			

Do you have a fenced yard? $\square$ Yes $\square$ No
If yes, what material is it made of and how tall is it?
If no, are you willing to install a fence?
If you do not have a fenced yard and do not plan on getting a fence installed, how will the dog
you are applying to adopt get exercise?

## I, the undersigned, agree to the following terms:

- 1. I agree to provide this animal with the proper veterinary care, adequate shelter, food and water, and to treat this animal in a humane manner.
- 2. This animal that I am applying to adopt is going to be kept as a family pet.
- 3. I have or agree to provide a fenced yard or enclosure suitable for the size of the animal.
- 4. I will neither keep this animal outside continuously nor keep it exclusively as a guard dog.
- 5. I agree to comply with all laws and ordinances concerning animals in place for the area in which I live.
- 6. I certify that all my dogs are registered with the jurisdiction in which I live, are sterilized, and are current on their rabies vaccinations. I understand that I may be required to provide documentation of such to Jefferson County Animal Control prior to adopting a new dog.
- 7. I give any representative of Jefferson County Animal Control permission to contact any entity or person listed on this adoption application to assist in making a decision in placing a pet with me.
- 8. I agree to allow any representative of Jefferson County Animal Control to make an appointment to visit my residence before the placement of the animal I wish to adopt.
- 9. I understand that I will transport any dog(s) that I own to Jefferson County Animal Control to meet with the dog that I am applying to adopt prior to adoption.
- 10. I authorize any entity or person listed on this application to release information about me by phone, print, or electronic medium to any representative of Jefferson County Animal Control.
- 11. This animal is being adopted as my pet and not as a gift for anyone.
- 12. In the event that I cannot or no longer wish to keep this animal, I agree not to abandon the animal, but to find the animal a suitable home or return it to Jefferson County Animal Control
- 13. I agree to have this animal sterilized and vaccinated for rabies as part of the adoption procedure. These processes must be arranged through Jefferson County Animal Control including having the animal transported by Jefferson County Animal Control to the designated veterinarian prior to adoption.
- 14. I understand that Jefferson County Animal Control is not responsible for the health of this animal and is not liable for any medical expenses related to this animal after its adoption.
- 15. I am certifying that all of the answers above are true and accurate to the best of my knowledge and I agree to the conditions herein.

Applicant Signature:	Date:		
Animal Control Officer's Signature: _			
Adoption Cost:	Paid By: □ Check (check number:	) □ Cash	