



# Saving Pets One at a Time Dog Adoption Application

**S.P.O.T**  
c/o 910 N. Burlington Blvd.  
Burlington, WA 98233  
FAX: 360-766-7804  
360-416-8219

Dog of Interest: \_\_\_\_\_ Number: \_\_\_\_\_

Applicant Name(s) : \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Country/ZIP \_\_\_\_\_

Phones: (home) \_\_\_\_\_ (cell) \_\_\_\_\_ (email) \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Wk. Ph: \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Wk. Ph: \_\_\_\_\_

1. Are you at least 18 years old?  YES  NO ID or Driver License # \_\_\_\_\_

2. Do you  own /  rent your home? If you rent, please provide proof of permission for pet.

3. For whom are you adopting this dog? \_\_\_\_\_

4. How do you plan to keep your new dog confined to your property? Check all that apply:

In the house  Kennel or Crate  Fenced Yard  Tie-Out or Run-line  In Garage  Train to stay

On Patio/Deck  Outside Dog Run  Other. Explain: \_\_\_\_\_

5. If 'Fenced Yard', describe fencing and yard: \_\_\_\_\_

6. Where will the dog be kept during the day? (Be specific) \_\_\_\_\_ Night? \_\_\_\_\_

7. List pets, other than dog(s), in household: \_\_\_\_\_

8. List other dogs: s-spayed, n-neutered, it-intact/gender/age (ie: s/f/3y or it/m/5m) \_\_\_\_\_

9. Please list prior pets and why they are no longer with you: \_\_\_\_\_

10. List all people living in your home by gender/age: \_\_\_\_\_

Anyone with special needs or handicaps? \_\_\_\_\_ Specify: \_\_\_\_\_

11. Do children come to your home regularly? YES  NO  Ages? \_\_\_\_\_

12. Do you own livestock or poultry? Specify: \_\_\_\_\_

13. What training method do you plan to use with your new dog? \_\_\_\_\_

14. What is the name of your veterinarian or one you plan to use? \_\_\_\_\_

15. What is your opinion of crate training or crating a dog? \_\_\_\_\_

16. S.P.O.T. may request to check your home and yard area. Do you have any objection to this? \_\_\_\_\_

17. What do you want in a dog? \_\_\_\_\_

## CURRENTLY S.P.O.T. IS ONLY ACCEPTING CASH ADOPTION FEES

I understand that this is an adoption, NOT a sale and that pet adoption agencies reserve the right to postpone, refuse or rescind any adoption. I certify the above information to be true and understand that any false information may result in cancellation of the adoption.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Adoption counselor: \_\_\_\_\_ Foster: \_\_\_\_\_

Adoption Fee: \_\_\_\_\_ Note: \_\_\_\_\_