PET ADOPTION APPLICATION AND AGREEMENT

Barnwell County Animal Shelter

55 Diamond Rd.

Barnwell, SC 29812

803-259-1656

***Applicant Information***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Name Mailing Address (including city, state, and ZIP code)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Physical Address (if different from mailing address)

Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Applicant’s Statement of Understanding***

***I hereby promise and agree***:

* That I am at least 18years of age.
* To adopt the animal solely as a household pet and companion.
* To provide adequate food, water, and shelter at all times.
* To not violate any state or municipal anti-cruelty or licensing laws.
* To notify the Barnwell County Animal Shelter and other appropriate agencies if the animal is lost or believed to be stolen.
* To provide routine health care including heartworm prevention, rabies and other vaccinations, and flea and tick control.
* To procure professional medical care at once should the animal become sick or injured.
* To refrain from physical abuse of the animal, from confining the animal for excessive periods of time without exercise and from otherwise treating the animal in an inhumane manner.
* To not permit or cause this animal to be used for purposes of experimentation.
* Acknowledgement that a welfare visit by Law Enforcement may be requested if at any time there are serious concerns regarding the animal’s health or safety.

***Heartworm Treatment***

Dogs that are heartworm positive, unless prearranged in writing with the shelter manager, will be the responsibility of the adopter to seek treatment. Treatment should be sought within one month of adoption with a licensed veterinarian and followed through consecutively until treatment is complete. Failure to begin heartworm treatment of a heartworm positive dog will be considered a violation of the adoption contract and said animal may be taken through a Claim and Delivery proceeding.

***Spay/Neuter Surgery***

Animals, cats or dogs, that are too small or too young for surgery (Spay/Neuter) at time of adoption, must be followed up at age appropriate time with Dogwood Animal Hospital, Barnwell, SC for surgery. Adoption cost covers the spay/neuter surgery at Dogwood Animal Hospital only. Non-compliance could lead to said animal being taken through a Claim and Delivery proceeding.

***Important Notice***

**While the Barnwell County Animal Shelter makes an effort to place only healthy animals, they cannot guarantee the health of any animal adopted from the shelter or to be responsible for any medical expenses which may be incurred after adoption. The Barnwell County Animal Shelter hereby expressly disclaims any implied or express warranties regarding health, temperament or whether the animal is housebroken. Further, Barnwell County will not be responsible for any injuries or property damage caused by an animal adopted or fostered to adopt from this shelter.**

***Costs and Attorney’s Fees***

In the event legal action is necessary because of a violation of this agreement and expenses and/or court costs and attorney’s fees are thereby incurred, the undersigned agrees to pay those costs occasioned by the Barnwell County Animal Shelter.

***Animal Information***

Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Micro Chip No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dog ( ) Cat ( ) Male ( ) Female ( ) Age \_\_\_\_\_\_\_\_\_\_\_\_

Breed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Description \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby acknowledge receipt of the above described animal in exchange for payment of $ \_\_\_\_\_\_ as shown in Receipt No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ dated \_\_\_\_\_\_\_\_\_\_\_\_\_.

Disclaimer about the animal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Heartworm Status for Dogs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*By signing below, I certify that the information I have given is true and I recognize that any misrepresentation of facts may result in my losing the privilege of adopting a pet. I understand that the Barnwell County Animal Shelter has the right to deny my request to adopt an animal, and I authorize investigation of any and all statements in this application.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Applicant’s Signature Date

(Return to Shelter) Next Shots Due: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spay/Neuter @ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Surgery Date: \_\_\_\_\_\_\_\_\_

Foster to Adopt: I am fostering this animal until it’s spay/neuter surgery date. I agree to bring the animal to its appointment on time and on the date scheduled. If I cannot make the surgery date, I will notify the Vet’s office at least one day prior and reschedule the surgery at that time. I agree to keep this animal from other animals of the opposite sex to prevent accidental pregnancy. Surgery is still expected if pregnancy occurs.

I also agree not to give away, sell, or move this animal from my address until the adoption is complete. I understand the animal is still the property of Barnwell County Animal Shelter until the surgery is completed and all fees are paid. **Payment is expected on or before date of Surgery.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Applicant’s Signature Date

**Adoption Consultation Questions**

Are you at least 18 years of age, as required for pet adoption by Barnwell County Animal Shelter? Yes \_\_\_\_ No \_\_\_

Who is or will be your veterinarian? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you surrendered an animal to us or another Shelter in the last 12 months? Yes ( ) No ( ) If yes, please

explain. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you are adopting the animal for someone other than yourself, please explain. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please describe how you intend to keep this animal confined to your property and its living environment, i.e., fenced yard, kennel, chain, inside house, etc.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you rent or live with someone else, are pets permitted? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will young children have access to the animal you are adopting? Yes \_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_

Do you have other animals in your home? \_\_\_\_\_\_ cat/ \_\_\_\_\_\_\_ dog

Are your other animals receptive to another animal coming into your home? \_\_\_\_\_\_yes/\_\_\_\_\_\_\_no

If no, will you have a way to keep them separated? \_\_\_\_\_\_\_\_ yes/\_\_\_\_\_\_\_no

Are your other animals up-to-date on rabies vaccines? \_\_\_\_\_yes/\_\_\_\_\_\_no

If no, it is required by SC Law that each animal inside or out be vaccinated for rabies every year. You can get a vaccination from your local vet or tractor supply vet clinic locally. There are many other options outside of Barnwell County as well.

Comments (including reason for non-approval if applicable):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approved ( ) Not Approved ( )

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Shelter Employee’s Signature Date

Deposit Paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Full Adoption Fee Paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sponsored Adoption: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fee Waived Adoption: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Paid Via Square Up: \_\_\_\_\_ Paid Via Pay Pal: \_\_\_\_\_\_\_

$ Collected/Accepted by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_