

For staff use only: _____ accepted _____ declined _____ Initial

Ionia County Animal Shelter - Cat Adoption Survey

Name(s) of cat(s) that you are interested in: _____

Name: _____ Date: _____

Address: _____ City: _____ Zip: _____

Email: _____ Phone: _____

1.) Are you over 18 years of age? (**You must be 18 years or older to adopt**) YES NO

2.) Please list house hold members AND their ages, including you:

3.) Does everyone in the household want to adopt a cat? YES NO

If not, why? _____

4.) Do you own or rent your home? OWN RENT – from who? _____

(If you rent your home, we MUST see a copy of your pet policy or speak to a landlord. Verbal or written permission is needed in order to adopt.)

5.) List all dogs, cats, and ferrets CURRENTLY living at your home:

Name	Breed	Age	Sex (M/F)	Neutered?	Inside or outside pet?	How long owned?

6.) What is the name and phone number of your regular veterinarian? If you do not have one who will be your regular veterinarian? _____

7.) Will you be taking your new cat to this veterinarian? YES NO

If no, which one? _____

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8.) Please tell us why you would like to own a cat:

9.) What kind of food will you feed your cat? Check all that apply

Dry Food

Wet Food

Combination

10.) How often will you feed your cat? Check all that apply

Once daily

Twice daily

Free food

11.) Do you plan to declaw your cat? YES NO

12.) Do you intend to let your cat outside? YES NO

How often? _____

13.) Cats leaving the shelter have had only their first set of vaccinations, and may be too young for a rabies vaccine. Are you willing to take your cat to the vet for follow up vaccines?

YES

NO

14.) Do you understand that the general annual cost of owning a cat is between \$300 to \$800 dollars?

YES

NO

15.) Please check any of the items that you would like to discuss with us before adoption a cat.

Declawing

Vaccines

Microchipping

Cat Box manners

Deworming/fleas

16.) Please provide us with the **names** and **numbers** of one personal and veterinary reference. Ionia Animal Shelter has the right to contact said reference at any point before or after adoption.

Personal Reference: _____

Veterinary Reference: _____

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Certifications, Authorizations, Releases, and Understandings

- I certify that all statements on this survey are made truthfully and without evasion, and I understand that such statements may be sufficient reason for not being allowed to adopt a cat from Ionia County.
- I authorize Ionia County to contact my veterinarian, and my landlord, to confirm how I have cared for companion animals in the past, and how I am likely to care for an animal adopted from Ionia County.
- I authorize my veterinarian to release all records of the animals I own or have owned in the past.
- I understand that the animal(s) I adopt from Ionia County may require veterinary or health treatment beyond that provided by Ionia County Animal Shelter prior to taking an animal home.
- I acknowledge that Ionia County does not employ a veterinarian and is not responsible for providing treatment or incurring the cost of treatment needed by this animal.
- I understand that with proper care, this pet can live 15 years or more, and I am prepared to commit myself to the long term care and protection of any animal I adopt from Ionia County.
- I will not sell or give away the animal(s) that I adopt from Ionia County. If I am unable to care for this animal(s), or I choose not to, I agree to return this animal (s) to Ionia County Animal Shelter during normal business hours, and will not abandon or harm this animal(s) in any way.

Ionia County Animal Shelter

3853 Sparrow Drive

Ionia, MI 48846

616-527-9040

Please answer **all** of the questions, save it with your name as an example:
[Jane_Doe_Adoption_Application.pdf](#) and email it to ioniaanimalshelter@hotmail.com

Signature: _____

Date: _____