

## FACTORS FOR ADOPTERS TO CONSIDER BEFORE ADOPTION

Pflugerville Pets Alive! wants nothing more than to match one of our pets to a new adopter. Over time, we have discovered that there are many things that factor into a new home not working out. Please read below and sign at the bottom that you are aware of the following risk factors and will ensure that this pet does not suffer if these situations were to happen to you:

1. Age of adopter. Young people tend to adopt animals and not recognize that their life circumstances are about to change dramatically and that can be a deal breaker (or even death sentence) for a pet. What will happen to this pet if you were to move in with someone allergic to pets, move abroad, or have to move back in with family members? What about if you have children? Will there no longer be time for your pet?
2. Job status. Are you in the job that you foresee having for the next 10-15 years? If not, what are the possible scenarios your life will face? Will you possibly move very far away for a job? Will you possibly have to move to a place that doesn't accept animals? Would you have to travel a lot? What happens to the pet if you temporarily lose your job?
3. History of previous pets. What happened to your last pet(s)? If you have a history of getting a pet only to relinquish it to a friend, family member, or shelter, you definitely want to put some serious thought into obtaining your next pet. Make sure that you do not upset a pet's life by having to give that pet away because your life changes again.
4. Marital status: What will happen to this pet if you end up with a person who does not like pets, is allergic to pets, or has pets of their own? Will you make sure this pet has a place in your household or that you find a suitable home (ie the pet is NOT taken to the shelter, even if you have no other options)?
5. Financial situation: Do you have the funds to care for this pet? What if this pet gets sick next month and the vet says it will cost \$1000 to treat it? Are you sure you can make a commitment to provide monthly heartworm prevention for a cat for the next 10-15 years? In order to get that heartworm prevention, you usually have to see a vet office once a year and get a yearly heartworm test as well as vaccines. This is typically at least \$300 per year.
6. Housing. Do you rent? If yes, then you need to be aware that many landlords do not allow pets of any kind and some have specific rules against certain types of pets (dog size and breed and number). Do you know the rules? If yes, will you always live in a place that allows pets of this type? What will you do to prevent a pet from going to the shelter because of your housing situation? If you do not know the rules, we strongly recommend you make sure this new pet is allowed before incurring the cost of adoption and causing stress in this animal's life by having to return him/her.
7. Animal behavior. Do you know much about dog or cat behavior? It is not uncommon for dogs to develop separation anxiety after being in an animal shelter which leads them to very destructive behavior. Cats can also develop litter box problems especially during times of stress. If one of these issues occurs, will you give up on the dog or cat? Or will you seek the behavior help you need and make the time to help your new pet acclimate to your home?

Please read our return policies as well. Thank you for considering adoption. We know that each animal in our care is special and we will do everything we can to help your new pet transition from our care to yours.

Potential Adopter

Signature \_\_\_\_\_

Date \_\_\_\_\_



Driver's License will be requested when you adopt. This questionnaire will remain with PPA! once completed.

Cat Name: \_\_\_\_\_ Date \_\_\_\_\_

**Applicant Information**

Name \_\_\_\_\_ Age \_\_\_\_\_

Occupation \_\_\_\_\_ Driver's License \_\_\_\_\_

Email \_\_\_\_\_

Mobile \_\_\_\_\_ Work \_\_\_\_\_ Home \_\_\_\_\_

Address \_\_\_\_\_

City, state, zip \_\_\_\_\_

Children (with ages) \_\_\_\_\_

List any additional people in the household: \_\_\_\_\_

Who will be responsible for the cat's care? \_\_\_\_\_

Has anyone in your household experienced cat allergies or asthma?  Yes  No

Are you prepared to care for this cat for 15-20 years?  Yes  No

Why are you looking to adopt a cat? (check all that apply)  Companion for you/spouse  Companion for children  
 Companion for pet  Gift  Replace lost/deceased cat  
 Other (please explain) \_\_\_\_\_

This address is:  House  Apartment/Condo  Townhouse  Mobile Home  Other \_\_\_\_\_

Will the cat reside at this address?  Yes  No

Do you own or rent your home?  Own  Rent

**Renters:**

If renting, please note that we may require proof that this pet will be permitted in your residence.

How much is your pet deposit? \_\_\_\_\_

Do you have permission to have a pet?  Yes  No

Landlord's Name and Phone Number \_\_\_\_\_

How long have you resided at this place? \_\_\_\_\_

Do you have plans to move in the near future?  Yes  No

Where to? \_\_\_\_\_

Do you have any of the following?  Patio  Balcony  Pet door  Unscreened windows  
 Unscreened doors  Back Yard  Front Yard



In what areas of your home will your cat be allowed? \_\_\_\_\_

Where will your cat sleep at night?  Cat Bed  Garage  My Bedroom  Outside  
 Anywhere (s)he wants  Other \_\_\_\_\_

Will your new cat be an indoor or outdoor pet?  Indoors  Outdoors  Both  
If both, how much time will your new cat be outdoors? \_\_\_\_\_

If allowed outside:  Anytime  Daytime only  Under supervision  
 On balcony/patio only  On a leash  Only when cat is older

Do you have other pets?  Yes  No  
 Dogs?  Cats?  Other? \_\_\_\_\_

Please list any pets you currently own and their previous exposure to cats:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If so, please describe their interaction:  
\_\_\_\_\_  
\_\_\_\_\_

Where did they come from?  
\_\_\_\_\_  
\_\_\_\_\_

Please list any pets you previously owned:  
\_\_\_\_\_  
\_\_\_\_\_

What happened to pets you previously owned?  
\_\_\_\_\_  
\_\_\_\_\_

If deceased, what was the cause of death?  
\_\_\_\_\_  
\_\_\_\_\_

If you own or previously owned cats, were any of them declawed?  Yes  No

Do you plan to declaw your new cat? (circle one)  Yes  No  Maybe

If you have a veterinarian, what is their name and phone #:

Name \_\_\_\_\_

Phone Number \_\_\_\_\_

If you have other cats/pets, are they spayed/neutered?  Yes  No

If you have cats/pets, are their vaccinations current?  Yes  No

Are you prepared to cover any vet expenses your pet may incur throughout its life?  Yes  No

What dollar amount, for a single illness, would be too much? \$ \_\_\_\_\_



What will you do if your cat claws furniture? \_\_\_\_\_  
\_\_\_\_\_

What is a behavior that would not be acceptable to you? \_\_\_\_\_  
\_\_\_\_\_

What amount of time is reasonable for your cat to adjust to you and your home? \_\_\_\_\_  
\_\_\_\_\_

What will you do with your new cat:  
if you move to a new home that does not allow pets? \_\_\_\_\_  
if you get married (if you're single)? \_\_\_\_\_  
if a new boyfriend/girlfriend is allergic to cats? \_\_\_\_\_  
if you travel? \_\_\_\_\_  
if you moved:  
locally? \_\_\_\_\_  
Out of state? \_\_\_\_\_

Under what circumstances would you not be able to keep this new cat? (Check all that apply.)

- Pregnancy/Baby Divorce/Separation
- Needs too much attention
- Scratches furniture
- Expensive vet bills
- Sprays, litter box problems
- Cat becomes disabled
- Other (please specify): \_\_\_\_\_
- Spouse/child is allergic
- Job change/loss New house/apt.
- Behavioral problems
- Conflicts with other pets
- Needs special diet
- Requires daily treatment

If you have to give up this cat for any of the above checked reasons, what will you do with the cat? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Were you ever in a situation where you were not able to keep a pet?  Yes  No

If yes, please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This questionnaire becomes part of our contract and records and will not be returned to you.

I certify that all the above information is true and accurate. I understand that this document will become part of PPA! permanent records.

I authorize Pflugerville Pets Alive! to use my name, statements and likeness, without charge, for promotional purposes in pet adoption publications, advertising, video, web, new media, or other formats.  
 Yes  No

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



Just like you take great care to ensure your furry family members are protected, we at Pethealth care about your safety and wellbeing. Our team at 24PetWatch are there with you through it all!

We are a proud partner in support of your shelter and would like your consent to reach out to you by phone, mail or email. These communications will be about the following:

- Information about your pet’s microchip – essential to ensuring your pet can get home safe in the event they ever get lost
- 24PetWatch Insurance options that can help protect your pet and your wallet.
- Special deals and discounts on products and services and partner product and services.

We are dedicated to protecting your privacy and ensuring your personal information is kept current, confidential and secure. We are committed to strict guidelines of confidentiality and security to responsibly safeguard your information.

I understand the disclosures read to me about the reasons Pethealth Services (USA) Inc. and PTZ Insurance Agency Ltd may call, mail or email me in the future. I understand that they may use automatic telephone dialing systems or pre-recorded/automated messages. These calls and their contents have been explained to me during the adoption process. I consent to receive these calls at the number I provided and acknowledge that I can decline to receive them in the future if I choose. I also acknowledge that my consent to receive these calls is not a condition of the purchase of any goods or services.

Yes  No

PPA USE ONLY	
Cat Name	
Released by	
Adopter’s Driver License Number	
Adoption Venue	
Adoption Fee	
Payment Method	