



City of Sacramento Animal Care Services  
 2127 Front Street, Sacramento, CA 95818  
 (916) 808-7387  
 www.SacPetSearch.com

## CAT ADOPTION APPLICATION

**Thank you for your interest in providing our shelter animals another chance at a permanent, loving home! In order to help us make the best possible fit between you and a new pet, please complete the information below.**

**PLEASE PRINT CLEARLY – YOU MUST BE 18 YEARS OR OLDER**

Name _____		Driver's License # _____	
Street Address/PO Box _____		City _____	State _____ Zip _____
Home Phone _____	Work/Cell Phone _____	Email _____	
Names of others in household (include ages of children) _____			
Length of time at address _____ <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Live with parents <input type="checkbox"/> Military			
<input type="checkbox"/> House <input type="checkbox"/> Condo <input type="checkbox"/> Apartment <input type="checkbox"/> Mobile Home			
Landlord Name & Phone _____		Complex Name _____	
How did you hear about our adoption program? <input type="checkbox"/> Friend/Family <input type="checkbox"/> Newspaper <input type="checkbox"/> Media <input type="checkbox"/> Website			
Name of current veterinarian _____			

### GENERAL INFORMATION

Do <u>all</u> the adults in your household know that you plan to adopt a cat?	Yes	No
<i>Are there any household objections?</i>	Yes	No
Does anyone in your household have any allergies to animals?	Yes	No
<i>If Yes, can/will the allergies be controlled by medication?</i>	Yes	No
Who will be the cat's primary caretaker (i.e. feed, train, exercise, groom, etc.)?		
Under what circumstances would you give up the cat? (If you have to move, for example.)		
Are you prepared to assume the financial responsibilities of providing your cat with adequate food, medical care, housing, training, toys, etc. (at least \$1,000/year)?	Yes	No
Are you prepared to commit a <u>life-long relationship</u> with this cat?	Yes	No
Have you ever been convicted of or received citations for violation of Federal, State, or Municipal animal codes?	Yes	No
<i>If Yes, please explain:</i>		

### YOU & YOUR HOUSEHOLD – CHECK ALL THAT APPLY

<b>Cat experience:</b> <input type="checkbox"/> First-time owner <input type="checkbox"/> Have had one or two cats <input type="checkbox"/> Knowledgeable & experienced	<b>Time away from home:</b> <input type="checkbox"/> Home all day <input type="checkbox"/> Out part-time <input type="checkbox"/> Away 7-10 hours daily	<b>Our cat will:</b> <input type="checkbox"/> Live indoors only <input type="checkbox"/> Live indoors/outdoors <input type="checkbox"/> Live indoors and garage <input type="checkbox"/> Live outdoors only	
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**TURN OVER TO COMPLETE APPLICATION ----->**

<b>Adoptions may require cat-to-child introductions.</b>	<b>Children in your Home:</b> <input type="checkbox"/> I have children ages _____ <input type="checkbox"/> I do not have children <input type="checkbox"/> Children visit my home ages _____ <input type="checkbox"/> No children visit my home	<b>Home Atmosphere:</b> <input type="checkbox"/> Calm & ordered <input type="checkbox"/> Somewhat active <input type="checkbox"/> Energetic <input type="checkbox"/> Very active	<b>Reason(s) for Adopting:</b> <input type="checkbox"/> Family companion <input type="checkbox"/> For my children <input type="checkbox"/> Gift for someone <input type="checkbox"/> Company for pet <input type="checkbox"/> Mouser <input type="checkbox"/> Other
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**HOPES & EXPECTATIONS – CHECK ALL THAT APPLY**

<b>Breed Type/Mix:</b>  <hr/> <b>Size of Adult Cat:</b> <input type="checkbox"/> Small, 5 to 8 lbs <input type="checkbox"/> Medium, 8 to 10 lbs <input type="checkbox"/> Large, 10 to 15 lbs <input type="checkbox"/> Extra large, 15+ lbs  <b>Coat:</b> <input type="checkbox"/> Short <input type="checkbox"/> Medium <input type="checkbox"/> Long <input type="checkbox"/> No preference	<b>Preferred Age of Cat:</b> <input type="checkbox"/> 2 to 4 months (Like a baby/toddler) <input type="checkbox"/> 4 to 12 months (Like a young child/teenager) <input type="checkbox"/> 1 to 3 years (Like an energetic young adult) <input type="checkbox"/> 3 to 5 years (Like a sensible adult) <input type="checkbox"/> 5+ years (Like a mature/senior adult) <input type="checkbox"/> No preference  <b>Sex:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> No preference	<b>Desired Characteristics:</b> <input type="checkbox"/> Very active <input type="checkbox"/> Active <input type="checkbox"/> Calm/Gentle <input type="checkbox"/> Outgoing <input type="checkbox"/> Confident <input type="checkbox"/> Reserved <input type="checkbox"/> Sensitive <input type="checkbox"/> Friendly <input type="checkbox"/> Playful <input type="checkbox"/> Submissive <input type="checkbox"/> Dominant <input type="checkbox"/> Well-mannered <input type="checkbox"/> Affectionate <input type="checkbox"/> Independent <input type="checkbox"/> Dependent <input type="checkbox"/> Declawed <input type="checkbox"/> Other  <hr/> <hr/>
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**Describe any additional expectations:**

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**WHAT DOGS, CATS & OTHER PETS CURRENTLY RESIDE OR HAVE RESIDED IN YOUR HOUSEHOLD WITHIN THE PAST 5 YEARS?**

Name	Type/Breed	Age	Where is pet kept?	Spayed/Neutered?	Still have?*	Licensed?

\* If this animal is no longer with you, please explain:

I declare that all of the information I have given above is true and complete. Providing false information or withholding information will void the application. I understand that Animal Care Services can decline my adoption application. I further understand that if my application is approved, City of Sacramento Animal Care Services reserves the right to conduct a home-check prior to the adoption of any animal to verify the suitability of my home environment as it relates to the needs of the animal, i.e., secure fencing, appropriate shelter, adequate space, safety, etc. I understand that adopting an animal from a shelter provides no medical/behavior assurances and I understand that a refund of the adoption fee is not provided.

Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE ONLY - STAFF COMMENTS**

Applicant's Name \_\_\_\_\_

P \_\_\_\_\_

Animal ID Number: \_\_\_\_\_

<b>Comments:</b>

Date _____ Counselor Initials _____ Approved _____ Check Priors File _____ Discussed Priors _____
Landlord Approval Date _____

Animal ID Number: \_\_\_\_\_

<b>Comments:</b>

Date _____ Counselor Initials _____ Approved _____ Check Priors File _____ Discussed Priors _____
Landlord Approval Date _____

Animal ID Number: \_\_\_\_\_

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