



Pet Search
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Date of Application ____/____/____

Adoption Application

Pet Search has been established to provide for the rescue, care and placement of animals that have been abandoned, neglected, abused or which cannot be kept by their previous owner(s). Pets adopted through Pet Search are placed exclusively as indoor family pets. All animals over the age of 5 months are altered prior to adoption; pets adopted under 3 months are required to be altered when reaching 3-4 months of age. All pets are kept in foster homes; therefore, Pet Search feels more knowledgeable about the pet and can help a prospective adopting family make the best decision for themselves as well as the pet. Please take your time choosing a pet for a companion. This is a LIFE-TIME commitment that requires money, time, training and, more importantly, LOVE.

Applications require approximately 3-5 business days to process.

Name: _____ Phone Number: _____ Cell/Home _____

Address _____

City: _____ State: _____ Zip: _____

DOB _____ Email Address: _____

Employer: _____ Employed: Full Time Part Time

Pet(s) you are interested in adopting from Pet Search _____

Have you ever given up, lost or euthanized a pet in the last 5 years? Yes No

If yes, what happened to them? _____

Have you adopted from Pet Search before? Yes No

Please list all pets who currently reside in your household along with Veterinarian who provides/care and vaccinations. If vaccinations are provided at a clinic, please include copies of the vaccination records. Pet Search will not approve an application unless all pets are current on vaccinations and spayed/neutered.

Type of Pet	Pet's Name	Age	Spayed or Neutered?	Pets current Veterinarian Name and Phone#

How many people reside in your household? _____ Adults _____ Children/Ages _____

Who will be responsible for this pet? _____

Please list a Personal reference:

Name _____ Phone# _____

Is this pet a gift for someone? Yes No If yes, for who? _____

Is anyone in your household allergic to dogs or cats? Yes No

How many hours a day would this pet be left alone? _____ Where will this pet be kept during the day? _____

Who will care for your pet during vacation or in an emergency? _____

Current residence House Apartment Condo/Townhouse Mobile home Parents home

How long have you lived at this address? _____ Years Do you: Own Rent

If you rent, please provide your landlords name and phone # _____ Does your landlord have size /breed restrictions? Yes No If yes, which breeds? _____

How much are you willing to spend monthly on a new pet? _____

(Food, Vet Care, Toys, Litter, Heartworm/flea and tick preventative medicine)

What is the best time to contact you for an in-depth telephone interview? _____ AM _____ PM

Are you willing to drive to the foster home for a second interview? Yes No

May we make a Pre-adoption/Post adoption visit to your home at a mutually convenient time? Yes No

DOG ADOPTION

Is your yard fenced in? Yes No Will the dog be: Walked several times a day Chained Allowed to run freely

Do you plan to enroll this animal in obedience class Yes No

How many times per day will you be able to exercise your dog? _____

How do you feel about using a training crate? _____

CAT ADOPTION

Will you have this cat declawed Yes No Are your current cats declawed Yes No

Will you allow this cat outside Yes No

If yes, will it Roam Freely Be in a Catio Be on a leash

Pet Search reserves the right to request additional information from the applicant or require that certain conditions be met before approving an application. We also reserve the right to reject any application if the foster home coordinator and/or foster home feels it is not in the best interest of the pet.

Signature of Applicant _____ Date: _____

