



Southeast Volusia Humane Society
1200 South Glencoe Road • New Smyrna Beach, FL 32168
Phone: 386-428-9860 • Fax: 386-423-1376
Website: www.sevhs.com • Email: info@sevhs.com



ADOPTION APPLICATION

1. NAME: _____ HOME PHONE: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
2. Do you own your own home? Own Rent Other: _____
If you rent, provide your landlord's name & phone: _____
3. Do you live in a: House Apartment Condo Mobile Home Other: _____
4. Do you have a fenced yard? Yes No Kennel
If yard is fenced, Height: _____ Type: _____ Does fence completely enclose yard? Yes No
5. If yard is not fenced, where will the animal spend the day?
 Indoors Outdoors Crate Garage Kennel Tied outside Other: _____
6. Will the pet be primarily: Inside Outside Both
7. Do you know about crate training? Yes No
8. Do you have any other animals in the household? Yes No
If yes, How Many: _____ What Kind: _____
Names: _____
9. Do your other animals have up to date Rabies vaccinations? Yes No
10. Are your other animals spayed or neutered? Yes No
11. What Veterinarian Clinic do you use?
Name: _____ Phone: _____
12. What kind of pet do you wish to adopt? Dog Puppy Cat Kitten
13. Do you want a: Male Female
14. Give the reasons you wish to adopt a new pet: (check all that apply)
 Family Pet Gift for Another Security for Home/Business
 Breeding Companion for Other Pet
15. Are you willing to housebreak a new pet? Yes No
16. Do you know about crate training? Yes No
17. Do you agree to have the new pet spayed/neutered? Yes No
18. Are you aware of the need for heartworm medication? Yes No
19. Do you agree to license your new pet and give it yearly vaccinations? Yes No
20. Are you financially able to care for a new pet? Yes No
21. Do you agree to return the animal to the Southeast Volusia Humane Society if you can no longer care for or keep the animal? Yes No
22. Are you willing to allow a representative of the Humane Society to visit your home before or after you adopt an animal? Yes No
23. Do all adult members in your household agree to this adoption? Yes No
24. Have you ever had to surrender your animal to an animal shelter in the past? Yes No
If yes, please explain: _____
25. Do you plan to move within the next few months? Yes No



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*** WE RESERVE THE RIGHT TO REFUSE ANY APPLICANT ***

PLEASE READ AND SIGN

All the information I have provided on this application is true and complete. Should I adopt an animal, I agree to provide it with adequate food, water, shelter, training, affection and medical care. I agree that the animal will reside at my home as a pet. I agree to abide by the Southeast Volusia Humane Society's Adoption agreements. I also understand that the Southeast Volusia Humane Society is not responsible for the accuracy of information received about the temperament, habits, or physical condition of the animals available for adoption. I understand that it is my responsibility to evaluate the animal myself before agreeing to adopt it. I am in full agreement with the terms and conditions of adoption of an animal from the Southeast Volusia Humane Society. The Southeast Volusia Humane Society will be in no way liable or responsible for any damages, accidents, injuries or medical expenses resulting from an adoption of an animal into my home.

Applicant Signature: _____ Date: _____

Witness: _____

----- **** FOR OFFICE USE ONLY **** -----

No-Adoption: OK On File - Reason: _____

Application: Approved Denied

Explain: _____

Approved by: _____

Vaccinations Checked: NA Checked: _____

Animal is on hold until: _____

Animal # _____ Dog Puppy Cat Kitten

Wish List: _____

Breed: _____ Sex: _____ Age: _____