



Dog & Kitty City is operated by  
The Humane Society of Dallas County  
2719 Manor Way  
Dallas, TX 75235  
214.350.7387

## Adoption Application

In order to adopt a pet:

- You must be 21 years of age or older.
- You must have some form of identification with your current address.
- You must have the knowledge and consent of all adults living in your household.
- You must be able and willing to spend the time and money necessary to provide training, medical treatment, and proper care for a pet.

The welfare and happiness of our animals are our top priorities. We usually have a variety of pets from which to choose. We will do our best to find a pet with whom our applicants are compatible. Finding a perfect match is important to us, the animal, and the future pet owner. Owning a pet is a significant and long-term responsibility. Following is a list of questions which will better aid us in finding a pet that is best suited for you. Please answer all of the questions thoroughly and honestly. Please remember, the animals in our care belong to us, and they are adopted out at our discretion. We reserve the right to refuse adoption to any applicant.

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

Name of spouse or life partner: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

DOB: \_\_\_\_\_ Spouse's/Partner's DOB: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Full Time \_\_\_ Part Time \_\_\_

S/P's occupation: \_\_\_\_\_ Full Time \_\_\_ Part Time \_\_\_

Are you a student: Yes \_\_\_ No \_\_\_

Name of the pet in which you are interested: \_\_\_\_\_

Please answer the following questions:

1. Have you ever applied for a pet from our shelter before? Yes \_\_\_ No \_\_\_  
If yes, when? \_\_\_\_\_ Which pet? \_\_\_\_\_
2. Have you ever owned a pet(s) before? Yes \_\_\_ No \_\_\_ If yes, was it a dog(s) \_\_\_ cat(s) \_\_\_?  
Where did you get it? \_\_\_\_\_ How long has it lived with you? \_\_\_\_\_  
If you no longer have it, what became of it? Lost \_\_\_ Gave it away \_\_\_ Sold it \_\_\_ Died \_\_\_  
Other: \_\_\_\_\_ Briefly explain: \_\_\_\_\_
3. How many pets do you currently have at home? \_\_\_ Dog(s) \_\_\_ Cat(s) \_\_\_ Other  
Briefly describe: \_\_\_\_\_
4. Are all of your canine or feline pets spayed or neutered? Yes \_\_\_ No \_\_\_
5. Are they on heartworm preventative? Yes \_\_\_ No \_\_\_
6. How many pets other than your current pets have you had within the past five years?  
\_\_\_ Dog(s) \_\_\_ Cat(s) \_\_\_ Other Briefly describe:  
\_\_\_\_\_
7. Where do your current pets stay during the day time?  
If you have a cat(s): Inside only \_\_\_ Outside only \_\_\_ Inside & Outside \_\_\_  
If you have a dog(s) Inside only \_\_\_ Outside only \_\_\_ Inside & Outside \_\_\_
8. Where do your current pets stay during the night time?  
If you have a cat(s): Inside only \_\_\_ Outside only \_\_\_ Inside & Outside \_\_\_  
If you have a dog(s): Inside only \_\_\_ Outside only \_\_\_ Inside & Outside \_\_\_
9. What type of pet are you looking for? Puppy \_\_\_ Dog \_\_\_ Kitten \_\_\_ Cat \_\_\_
10. Are you looking for a specific breed? Yes \_\_\_ No \_\_\_ If yes, what kind? \_\_\_\_\_
11. What size of you prefer? Under 12 lbs \_\_\_ Under 25 lbs \_\_\_ Under 100 lbs \_\_\_ Over 100 lbs \_\_\_
12. This pet would be:  
A.) A companion pet for me \_\_\_ a child \_\_\_ an elderly person \_\_\_ A gift for someone else \_\_\_  
B.) Kept as a watch dog \_\_\_ a hunting dog \_\_\_ a guard dog for a business \_\_\_  
C.) Kept as a barn cat/mouser \_\_\_
13. Where would your new pet stay during the day time?  
If you adopt a cat(s): Inside only \_\_\_ Outside only \_\_\_ Inside & Outside \_\_\_  
If you adopt a dog(s): Inside only \_\_\_ Outside only \_\_\_ Inside & Outside \_\_\_
14. Where would your new pet stay during the night time?  
If you adopt a cat(s): Inside only \_\_\_ Outside only \_\_\_ Inside & Outside \_\_\_  
If you adopt a dog(s): Inside only \_\_\_ Outside only \_\_\_ Inside & Outside \_\_\_
15. Do you leave your windows and doors open at home? Yes \_\_\_ No \_\_\_ Sometimes \_\_\_
16. Do you have screens on your windows and doors? Yes \_\_\_ No \_\_\_
17. Do you want your pet spayed or neutered? Yes \_\_\_ No \_\_\_
18. Do you want your pet to have a litter of puppies/kittens? Yes \_\_\_ No \_\_\_
19. Do you have a fenced in back yard? Yes \_\_\_ No \_\_\_ Is there a lock on the gate? Yes \_\_\_ No \_\_\_  
What type of fence is it? Chain-link \_\_\_ Wood \_\_\_ Brick/Stone \_\_\_ Other: \_\_\_\_\_  
How high is it? 4 ft. \_\_\_ 5 ft. \_\_\_ 6 ft. \_\_\_ 8 ft. \_\_\_ Other: \_\_\_\_\_
20. Do you have a pool? Yes \_\_\_ No \_\_\_
21. If adopting a dog, do you plan on keeping him/her on a chain? Yes \_\_\_ No \_\_\_  
If yes, how many hours a day? \_\_\_\_\_
22. Have you ever house-trained/litter box trained a pet before? Yes \_\_\_ No \_\_\_  
If yes, briefly describe your approach: \_\_\_\_\_
23. Are you willing to do research or read books on pet training? Yes \_\_\_ No \_\_\_

24. If adopting a dog, do you plan on enrolling in an obedience class? Yes \_\_\_ No \_\_\_
25. Do you have the spare time during the days or evenings to spend meeting your pet's companionship needs? Yes \_\_\_ No \_\_\_
26. Have any of your current pets had medical problems in the past six months?  
Yes \_\_\_ No \_\_\_ If yes, explain \_\_\_\_\_
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27. Do you or anyone in your household have any allergies to animals? Yes \_\_\_ No \_\_\_ Don't know \_\_\_
28. On the average day, how many hours would your pet be left alone? \_\_\_\_\_
29. Do you travel frequently? Yes \_\_\_ No \_\_\_
30. Who watches your pet while you travel? A family member \_\_\_ A neighbor/friend \_\_\_  
A pet sitter \_\_\_ A kennel \_\_\_ A pet hotel \_\_\_ A veterinarian \_\_\_
31. How many children are in your household? \_\_\_\_\_ Ages: \_\_\_\_\_
32. Are there any children who visit you household frequently? If so, please state age(s) and gender(s).  
\_\_\_\_\_
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33. Is a new baby expected? Yes \_\_\_ No \_\_\_ If so, how will this affect your companion? \_\_\_\_\_
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34. What if the personality or size of a pet as an adult is not what you expected? Explain: \_\_\_\_\_
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35. How will life be different with a puppy/kitten vs. an adult animal? \_\_\_\_\_
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36. What if your new companion is a "digger," "biter," "scratcher," or claws the furniture? \_\_\_\_\_
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37. Do you have a veterinarian reference? Yes \_\_\_ No \_\_\_  
If yes, how long have you been visiting him/her? \_\_\_\_\_  
Name of Clinic: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Vet's Name: \_\_\_\_\_ (Please give phone number.)  
Is the pet(s) listed under a different name than the applicant's? Yes \_\_\_ No \_\_\_  
If yes, give name: \_\_\_\_\_  
Pet names on file with this vet: \_\_\_\_\_
38. Please give a personal reference, other than a family member.  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_ State: \_\_\_ Zip: \_\_\_\_\_  
Birth date or age: \_\_\_\_\_ Phone #: \_\_\_\_\_
39. Do you live in: An apartment \_\_\_ House \_\_\_ Condo \_\_\_ A mobile home \_\_\_  
Do you: Own \_\_\_ Rent \_\_\_
40. If you rent, can written permission be obtained from your landlord along with proof of deposit paid?  
Yes \_\_\_ No \_\_\_ Landlord's name: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Name of complex or mobile home park: \_\_\_\_\_
41. Is there a limit to the size or number of pet(s) you can have? Yes \_\_\_ No \_\_\_  
If yes, what are the limits? \_\_\_\_\_
42. How long have you lived at your current address? \_\_\_\_\_
43. Do you plan to move soon? Yes \_\_\_ No \_\_\_  
If yes, do you know your new address yet? \_\_\_\_\_  
\_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
44. What will happen to your companion animal if you move? \_\_\_\_\_
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45. Would you be willing to allow a DKC representative to visit your home? Yes \_\_\_ No \_\_\_

46. Are you prepared to provide regular veterinary care for the next 10 to 20 years which would include annual vaccinations, flea/tick treatment, and heartworm preventative? Yes\_\_ No\_\_
47. Do you agree to abide by the DKC requirements and to return the pet to DKC if you cannot keep it, and notify us if it is lost or dies? Yes\_\_ No\_\_
48. In case of emergency or death, who will care for the animal(s)? (Other than personal reference listed above.)

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_

49. Please indicate approximately how much you think it will cost you to
- A. Vaccinate and provide a yearly check-up for your pet: \_\_\_\_\_
- B. Feed your pet for a week: \_\_\_\_\_
- C. Spay or neuter your pet: \_\_\_\_\_

50. Have you approached any other animal charity/organization about adopting an animal?  
Yes\_\_ No\_\_ If so, which one: \_\_\_\_\_

51. How did you hear about us? \_\_\_\_\_

52. Are there any other comments you would like to make to support your application or any questions you may have? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

We do our best to place the right animal in the right home. Therefore, if we feel that the animal(s) and the applicant are not compatible, we retain the option to deny this application. Questions left unanswered may disqualify your pre-adoption application. Thank You.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Counselor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Adopting a pet is a lifelong commitment.  
Please, take it seriously.