

MOSTLY MUTTS ADOPTION APPLICATION  
Mail to: Owner: Cheryl Hill, 284 Little Mountain Rd., Sunbury, PA 17801  
Or EMAIL TO: [mostlymuttsonline@gmail.com](mailto:mostlymuttsonline@gmail.com)

<b>PET'S NAME (FROM WEBSITE OR NEWSPAPER) OR TYPE OF PET YOU WOULD LIKE TO ADOPT:</b>

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_

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

City, State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home #: \_\_\_\_\_ Cell#: \_\_\_\_\_ Work#: \_\_\_\_\_

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

Email (print legibly): \_\_\_\_\_

**PLEASE NOTE: PLEASE MAKE SURE YOUR VETERINARIAN & REFERENCES ARE AWARE THAT WE WILL BE CONTACTING THEM. VETERINARIANS ESPECIALLY PREFER NOT TO RELEASE INFORMATION WITHOUT THEIR CLIENT'S CONSENT. THIS INFORMATION IS IMPORTANT AND WITHOUT IT CAN HOLD UP THE ADOPTION.**

**A. General Information:**

1. Are you adopting for: Self \_\_\_ Children \_\_\_ Gift \_\_\_ Other \_\_\_\_\_
2. Do you own/rent: House \_\_\_ Apt. \_\_\_ Condo \_\_\_ Town House \_\_\_ Other \_\_\_
  - a. Owners: Who pays the mortgage? I do \_\_\_ Parents \_\_\_ Other \_\_\_
  - b. Renters (**required**): **Landlord:** \_\_\_\_\_ **Phone:** \_\_\_\_\_
3. Number of Adults: \_\_\_ Roommates: \_\_\_ Children (Ages): \_\_\_\_\_
  - a. Do you care for other children in your home: Yes: \_\_\_ No: \_\_\_
4. How many times have you moved in the past five years? \_\_\_\_\_

5. Is part of your yard completely fenced in? Yes\_\_\_\_\_ No\_\_\_\_\_

a. Type of fencing\_\_\_\_\_ Height:\_\_\_\_\_

6. Is there a doggie door? \_\_\_\_\_ Location? (house, garage, basement)\_\_\_\_\_

How/when is the doggie door used?\_\_\_\_\_

7. Do you work Full Time\_\_ Part Time\_\_ Stay/work at home\_\_ In College\_\_

Retired\_\_

8. Have you been denied by another rescue? Yes\_\_No\_\_Explanation:

\_\_\_\_\_

\_\_\_\_\_

**B. Pet Experience:**

1. Do you currently have other: Dogs #\_\_ Cats#\_\_ Other\_\_\_\_\_

2. Are your dogs and/or cats current on vaccinations? Yes\_\_No\_\_Some Are\_\_

**All pets must be current on vaccinations unless there is a medical reason for not doing so.**

3. Are your dogs and/or cats spayed/neutered? Yes\_\_ No\_\_ Some Are\_\_

**All pets must be spayed or neutered unless there is a medical reason for not doing so.**

4. Are your dogs and/or cats on heartworm preventative? Yes\_\_No\_\_

5. Are your dogs and/or cats on flea/tick preventative? Yes\_\_\_\_No\_\_

6. **Name** and **phone numbers** of vet/vets

\_\_\_\_\_

**PLEASE MAKE SURE YOUR VET INFORMATION IS COMPLETE SO THAT WE CAN VERIFY THAT YOUR PET(S) ARE SPAYED/NEUTERED AND THAT THEIR VACCINATION RECORDS ARE UP TO DATE. THIS MAY MEAN LISTING MORE THAN ONE VET IF YOU HAVE GONE TO MORE THAN ONE. PLEASE NOTIFY YOUR VET(S) THAT WE WILL BE CALLING AS THIS CAN HOLD UP THE ADOPTION PROCESS.**

7. Have you ever completed a dog obedience course? Yes\_\_ No\_\_

8. Have you ever surrendered an animal to a shelter? Yes\_\_ No\_\_

9. List all companion animals you currently have and have had in the past 10 years:

NAME	BREED	AGE	YEARS WITH YOU	WHERE IS IT NOW?

**C. Your New Pet:**

1. How long have you been looking for a new pet? Not Looking \_\_\_ Days

Months \_\_\_ Years \_\_\_

2. Reason for adopting (circle): Watchdog Family Pet Child's Pet Hunting Gift Companion for Other Pet Other (describe) \_\_\_\_\_

3. Were your previous pets a) Inside \_\_\_ b) Outside \_\_\_ c) Inside/Outside \_\_\_

4. Where will your pet stay during the day specifically: \_\_\_\_\_

5. Where will your pet sleep at night specifically: \_\_\_\_\_

6. How many hours on an average work day will your pet be unattended? \_\_\_\_\_

7. Are you planning on using a crate? Yes \_\_\_\_\_ No \_\_\_\_\_

a. If yes when will the crate be used?  
: \_\_\_\_\_  
\_\_\_\_\_

b. How many total hours a day will the crate be used? \_\_\_\_\_

c. Where will the crate be located? \_\_\_\_\_

8. Under what circumstances would you return this animal? (Circle all that apply) Bad Decision, Aggression Toward People, Aggression Toward Other Pet, Moving, Work Schedule Changes, Develops Behavior Problems, Barks, Poor Health, New Baby in Family, Allergies, Divorce/Break Up, Poor Planning on My Part, Others: \_\_\_\_\_

9. If bad behaviors occur, how likely are you to hire a professional trainer?  
Very Likely, Likely, Not Likely

10. How would **you** discipline bad behavior? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. What will you do if you a) catch your dog pottying inside? \_\_\_\_\_  
\_\_\_\_\_

b) If you don't see it happen, but find the pottying accident later? \_\_\_\_\_  
\_\_\_\_\_

12. Are you ready to care for a dog for up to 15 years? Yes\_\_\_ No\_\_\_ Not Sure\_\_\_

13. How much do you think **routine vet care** costs yearly? \$\_\_\_\_\_

14. How much are you prepared to pay for **emergency vet care**? \$\_\_\_\_\_

15. On a scale of 1 -10 (10 being the best), what would your dog rate you? \_\_\_\_\_

16. What is your definition of a "RESPONSIBLE PET OWNER"? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17. If you leave your home for an extended period (work or vacation), how will your dog be cared for if not accompanying you? \_\_\_\_\_  
\_\_\_\_\_

**Because we do not know you, we must check references (not optional).**

Name of one **Neighbor**: \_\_\_\_\_  
**Phone**: \_\_\_\_\_ **Second Phone**: \_\_\_\_\_

Name of **Non-family Member**: \_\_\_\_\_ Relationship: \_\_\_\_\_  
**Phone**: \_\_\_\_\_ **Second Phone**: \_\_\_\_\_

How did you hear about Mostly Mutts? \_\_\_\_\_  
\_\_\_\_\_

**AS OF 11/21/2016 ADOPTION FEES ARE AS FOLLOWS:**

Dogs Over 60 lbs.: FEMALES: \$175.00 MALES: \$150.00  
Dogs Under 60 lbs.: FEMALES: \$150.00 MALES: \$125.00

PURE BREED dogs/puppies price to be determined  
MIXED BREED puppies under six months: \$100.00  
SENIOR DOGS aged 8 and over: \$100.00

(Puppies under (6) six months of age must be spayed or neutered at your expense at (6) six months of age and a contract signed stating that you agree to do this.)

Do you agree to a HOME VISIT? \_\_\_\_\_

Best time and day to set up a visit: \_\_\_\_\_

Mostly Mutts, Inc. appreciates your patience and understanding throughout this application procedure. Please understand our goal is to make sure these animals are placed in only the best homes. Please read the following and sign below.

**MOSTLY MUTTS, INC. HAS THE RIGHT TO REFUSE AN ADOPTION FOR ANY REASON! THE RESPONSIBILITY OF MOSTLY MUTTS, INC. IS IN THE BEST INTEREST OF THE ANIMAL.**

I certify that the above information is true. I understand and agree that this adoption placement is conducted solely for the purpose of providing long-term care for the adopted animal (s). Should a representative of Mostly Mutts, Inc. ask to see the animal (s), reasonable access will be granted. If it is determined that the animal (s) are not properly cared for, the animal (s) may be reclaimed by Mostly Mutts, Inc. Further, I agree to pay any reasonable expenses, including legal fees that may be incurred by Mostly Mutts, Inc., in the event that the adopted animal (s) placed into my custody are reclaimed by Mostly Mutts, Inc. because of neglect or abuse of said adopted animal (s). This application remains the property of Mostly Mutts, Inc. A fully executed contract completes this adoption.

Signature:    Date:

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**For Mostly Mutts, Inc. use only: Approved    Denied**

**Comments:**