

[Please email completed application to butts.mutts@gmail.com](mailto:butts.mutts@gmail.com)

Butts Mutts Rescue
(a 501(c)(3) nonprofit charitable organization)

Adoption Application

Please be honest when completing this application. There are no wrong answers. The questions are designed to help place our dogs in the right homes.

Name of dog you are interested in, if applicable:

TELL US ABOUT YOURSELF:

Name (primary owner of the dog) _____ Age _____

Email address: _____

Home Address _____

City, State _____ Zip _____

Home Phone _____ Cell Phone: _____

How long in current home? _____

Employer _____

How long at current job? _____

Name (co-owner of the dog) _____ Age _____

Email Address _____

Cell phone: _____ Alt Phone: _____

How long in current home? _____

Employer _____

How long at current job? _____

Number of People in household, Total: _____

Number of Adults _____

Number of Children _____ Age(s) _____

Does anyone in the house smoke? Yes ___ No ___

Is everyone in the household in agreement about adopting a new pet? Yes ___ No ___

Does anyone in the household have any known animal allergies? Yes ___ No ___

If yes, please specify _____

TELL US ABOUT YOUR HOME:

Do you: Own _____ Rent _____

What type of dwelling is it?

House _____ Condo _____ Townhouse _____ Apt _____

Is your yard fenced in? Yes ___ No ___

If so, what is the height? _____ Type of fencing _____

Are there any breed/size restrictions where you live (e.g., by apartment management, condo or homeowner's association)? Yes ___ No ___

If so, what is restricted? _____

If you rent, please provide your landlord's name & contact information:

Name _____ Phone _____

Email _____

By providing your landlord's information, you are giving **Butts Mutts** permission to contact your landlord.

If you rent, have you already paid a pet deposit (if required)? Yes _____ No _____

TELL US ABOUT YOUR PETS:

Is the dog you are interested in adopting going to be your first pet? Yes _____ No _____

Did your family have pets when you were growing up: Yes _____ No _____

If the dog is not going to be your first pet, please complete the following:

CURRENT PETS:

Please list all cats & dogs currently in your household: _____

Have you ever turned an animal into a shelter? If yes, please explain.

Please provide contact information for your veterinarian:

Name _____

Address _____

Phone _____ Fax _____

What do you know about Heartworms?

By providing your veterinarian's information, you are giving **Butts Mutts** permission to contact your veterinarian. You also are giving permission for your Veterinarian to provide **Butts Mutts** with a reference.

TELL US ABOUT ADOPTING YOUR NEW DOG:

Where will your new pet be kept (please be specific)

During the day? _____

At night? _____

How many hours during the average day will your pet be alone without a human? _____

If your new pet is a dog, how do you plan to provide exercise for it (check all that apply)?

- Leash Walk Everyday
- Will Have Cable or Dog Run in Yard
- Will Be Free To Run in Fenced Yard
- Will Have Supervised Access to unfenced yard
- Will be Free to Roam Around
- Will Take Dog to Dog Park

How long have you been considering adopting an animal?

In the event you/someone in your home were unable to care for your adopted pet, who would be responsible for the animal's needs?

Please indicate age, breed and other desired characteristics that you are looking for in your new dog: _____

Please tell us why you are interested in adopting? Check all that apply:

Companion for Self Companion for Family

For Breeding Gift

For Protection For Child

Replace Previous Pet Companion for Other Pet

Other, please specify _____

Are you prepared to spend several weeks or, perhaps months, waiting for your new pet to adjust to a new environment? _____

Do you anticipate any major changes in your life that could affect a pet, such as a move, new baby, change of job/schedule, in the next year? 2 years? 5 years?

Please explain:

If adopting a puppy I understand that I am obligated to spay/neuter as soon as the dog is of age.

Signature

I certify that the above information is true and understand that false information may result in nullifying this adoption. Also, if an omission or untruth is discovered after an adoption takes place, I understand that **Butts Mutts** reserves the right to annul the adoption and reclaim the animal. I give **Butts Mutts** permission to fully investigate the information provided as well as contact veterinarians, landlords, etc. I give permission for my veterinarian to release any information asked by **Butts Mutts Rescue**. If the application passes this review, I agree to a home visit on a mutually agreed date and time by a volunteer before an adoption decision is made.

Signature (for electronic transmitting purposes your typed name will serve as a signature)

Date _____

Our adoptions are decided on what is the best match for the animal and its potential family, not on a first come first serve basis. We reserve the right to refuse an adoption.

Butts Mutts Rescue

PO Box 474

Jackson GA 30233