

Clinton County S.P.C.A. Pre-Adoption Questionnaire

For office use only:	R- _____
Comments:	Pen #: _____
	Landlord's Permission: Yes / No

DATE: _____

Name: _____ Phone: _____

Address: _____

Permanent Address _____

(if different than above): _____

Employer: _____

How many children in your household? _____ Ages: _____

How much time will this animal spend alone? _____

Who will be responsible for this animal? _____

Do you know and understand the local ordinances for licensing and leashing? Yes / No

List all animals you have owned in the last five (5) years.

Type/Name of Animal	Sex	Age	Spayed/ Neutered	What happened to pet?

Do all of your animals have current vaccinations? Yes / No

Have you ever adopted a pet from the Clinton County SPCA? Yes / No

Do you still have this pet? Yes / No

If "no", why? _____

Have you ever turned a stray animal in to the Clinton County SPCA? Yes / No
If "yes", why? _____

Have you ever been investigated for cruelty to animals? Yes / No
If "yes", what were the circumstances? _____

Has any pet that you have owned ever been turned in to the Clinton County SPCA because it was running at large? Yes / No

How did it get loose? _____

Did you claim this pet from the SPCA? Yes / No If "no", why?

What type of home do you live in?

House Townhouse Apartment Mobile Home
Please check: Rent ___ Own ___ Live w/parents ___

Do you have a fenced-in yard? Yes / No

Where will the animal live? Indoors / Outdoors

Landlord's Name: _____ Phone: _____

Address: _____

Who is your Veterinarian? _____.

Veterinarian phone number? _____

I give my permission for Dr. _____ to release my vaccination and spay/neuter records. _____ signature

PLEASE NOTE THAT SPAYING AND NEUTERING OF A SHELTER ANIMAL IS A PENNSYLVANIA STATE LAW!

Where did you hear about the SPCA's animals? _____