

City of Yuma Animal Shelter
102 North Birch Street • Yuma, CO 80759

ADOPTION APPLICATION

First Name _____ Last Name _____

Address _____ City/State _____ Zip Code _____

Home # _____ Work # _____ Cell # _____

Email _____ Date _____

Name of dog(s) you are interested in _____

How long have you been at your current address _____

House type _____ Own or Rent _____

Landlord Name _____ Landlord # _____

Current pet info (species, name, age, spay/neuter,shots)

Pet 1 _____

Pet 2 _____

Pet 3 _____

How do you feel about spaying/neutering your new dog? _____

Why do you want this dog? _____

How many adults are in your family or house? _____ How many children? _____

Age(s) of children _____ Applicant age _____

Has everyone in the family agreed to adding a new pet to the family? _____

Who will be responsible for feed, housetraining and obedience? _____

Is anyone in the family allergic to dogs? _____

Is anyone home during the day? _____ If so, who? _____

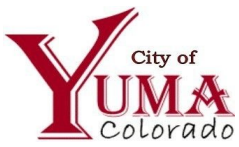
How many hours will the dog be home alone on average during the day? _____

How do you plan to integrate the dog into your everyday home life? _____

Where will the dog be when you are away from home for short periods or during your work day? _____

Contact: Laura Thompson • 970-360-9801

l.thompson@yumacolo.org



City of Yuma Animal Shelter
102 North Birch Street • Yuma, CO 80759

Where will the dog be when you are at home? _____

Where will the dog sleep? _____

Who will care for the dog if you are away for a few days? _____

How will you deal with the following possible situations:

- Fence Jumping _____
• Growling/Showing teeth _____
• Biting _____
• Chewing _____
• Housebreaking Accidents _____
• Being too active _____
• Incompatibility with other pets _____
• Illness in dog _____

Veterinarian Name _____ Veterinarian phone _____

Do you have a fenced yard? _____ If yes, what type? _____

What is the fence height at the lowest point? _____

If you do not have a fence, how will the dog get exercise and do his "business"? _____

It is CoYAS policy to do a home visit. Do you object to this? _____

How do you plan to train the dog? _____

Do you drive a pickup? _____ Will the dog be riding in the back? _____

Do you know the local/county ordinances where you live? _____

CoYAS representative comments:

Contact: Laura Thompson • 970-360-9801

l.thompson@yumacolo.org