

Precious Paws Confidential Online FELINE APPLICATION



2014
Online

NOTE: This Information Becomes Part Of Your CONTRACT & Our Data Base Should You Adopt A Cat From PRECIOUS PAWS Or One Of Our Independent Rescue Volunteers

----->>The Purpose of this Application is to make you Think about the
Responsibilities of Pet Ownership.<<-----



Instructions:

Please be sure to answer **ALL** of the questions, Front/Pg 1 & Back/Pg 2 .
PLEASE PRINT ! & DON'T FORGET TO SIGN BACKSIDE/Page 2 !

For Precious Paws' Use:

Date _____
~ONLINE~
Adoption Location To Meet At _____
Pet _____
N _____ Volunteer _____

<< PERSONAL & RESIDENCE >>

Name: _____

City _____ Zip _____ [We will ask for your full address if we place a pet with you]

Phones: Home () _____ Cell () _____ Work () _____

Occupation: _____

E-mail: _____

Are you at least 18 years of age? Yes _____ No _____ Anyone in home Smoke? Yes _____ No _____

Name of Spouse / Significant Other / Roommate(s): _____

Occupation: _____

If this relationship changes, with whom would the cat remain? _____

Children: No _____ Yes _____ Ages _____ Names _____

Do ALL adults in your household know you plan to adopt? Yes _____ No _____ Explain "no" _____

Who will be primarily responsible for the cat's care? _____

How many hours per day would the cat be left alone? _____

Is anyone in your household allergic to cats? Yes _____ No _____ Unsure _____ If "yes" On Meds? _____

Do you live in a: House _____ Apt. _____ Condo/Townhouse _____ Other _____

Do you have a doggie door? Yes _____ No _____

Do ALL of your windows have screens? Yes _____ No _____

Do you have a screen door? Yes _____ No _____

Do your doors open:
To a front/back yard _____
To a courtyard or outdoors _____
To an enclosed corridor _____

Is permission granted from your landlord or home owner's association to have a cat? Yes _____ No _____ Unsure _____

Landlord's name _____ Phone: _____

What is your primary reason for adopting a cat? _____

Companion: For you _____ Your spouse _____ Children _____ Other pet(s) _____ Mouser _____

Gift for: Name _____ Phone: _____

Relationship to you _____ If the cat is a gift, will it be a surprise? Yes _____ No _____

What brought you HERE today? Out shopping & saw kitties _____ Came looking for cat(s) to adopt _____ Referral _____

Petfinder.com _____ Online Communication _____ Newspaper Ad _____ Adopt-A-Pet _____ Other _____

< Your CURRENT PET(s) & New Pet INFO.: > How many CATs do you plan to adopt? _____

Do you have a dog? No _____ Yes _____ How many? _____ Breed _____ Age & Name _____

Do you have other cats? No _____ Yes _____ How many? _____ Age & Name _____

IF you have or have had other cats are / were they spayed/neutered? Yes _____ No _____

Would you have this **NEW** cat spayed/neutered? Yes _____ No _____

If No, please explain _____

IF you have or have had other cats are / were they declawed? Yes _____ No _____

Do you plan to declaw this **NEW** cat? Yes _____ No _____ Considering _____ Need more info. _____

Please explain: _____

What are you Feeding your **Current** cat(s)? _____

Do you or Are you willing to buy cat food from a Pet Supply store rather than a Grocery Store?

Yes _____ No _____ Too many brands _____ Too expensive _____ Explain (if necessary) _____

What **OTHER animals** do you presently own? (bird, fish, etc.) _____

Do you have a : Yard _____ Patio _____ Balcony _____ Porch _____ Garage _____

IF you have or have had other cats, are / were they allowed outside? Yes _____ No _____

If Yes, are / were they allowed outside: Anytime _____ Daytime only _____ Under supervision _____ On a leash _____

Will this **NEW** cat be: Indoors Only _____ Indoor/Outdoor _____ Outdoors Only _____

Please explain answers above: _____

IF you have or have had other cats: Are / Were their vaccinations current? Yes _____ No _____

Are / Were they in good health? Yes _____ No _____

If No, what is / was their medical condition? _____

Have / Had they been tested for Leukemia (FELV) Yes _____ No _____ Results _____

Have /Had they been tested for FIV? Yes _____ No _____ Results _____

Your VET's Name: _____ **Phone:** _____

When was the last time your CAT was at the VET? _____ What for? _____

Give a brief history of the PETS you have previously owned AS AN ADULT:

PET HOW & WHY OBTAINED HOW LONG KEPT WHAT HAPPENED TO IT?

Do you TRAVEL / VACATION a great deal? Yes _____ No _____

When you go away for a vacation or on business, **WHO** will care for the cat? Kennel _____ Sitter _____ Neighbor _____

Relative _____ Other _____ Please Refer Someone For Me _____

➔ UNDER WHAT CIRCUMSTANCES WOULD YOU CONSIDER RETURNING THE CAT YOU ADOPT? ➔ None Below

Personal changes: Divorce / separation _____ New spouse _____ Pregnancy _____ New baby _____ New roommate _____

New allergy _____ Job change/loss _____ Disability / illness _____ Moving: Locally _____ Out of state _____ Overseas _____

New house/apt. _____ New carpet/drapes/furniture _____ Other _____

Behavior problems: Kids too rough with pet(s) _____ Cat rough with kids _____ Does not get along with other pet(s) _____

Sprays/Doesn't use litter box _____ Scratches carpets/drapes/furniture _____ Keeps you awake _____ "Talks" too much _____

Demands too much attention/time _____ Other _____

Health problems: Cat incurs expensive vet bills _____ Requires daily treatment _____ Requires special diet _____

Tests positive for FELV or FIV _____ Cat becomes disabled _____ Other _____

<< ANY additional information you want us to know ? >> _____

<< Did you READ the Adoption Procedure Sheet in full? Yes No If "NO" please read it !!! >>

**** THANK YOU FOR FILLING OUT THIS APPLICATION.** THIS INFO. WILL BECOME PART OF YOUR CONTRACT & OUR DATA BASE SHOULD YOU, BE APPROVED BY OUR DIRECTORS AND THUS, ADOPT A CAT FROM **PRECIOUS PAWS** OR ONE OF OUR INDEPENDENT RESCUE VOLUNTEERS. By signing below you hereby give permission for Precious Paws to VERIFY the information you have provided on this Questionnaire. We reserve the right to refuse adoption to any person for any reason, except race, creed, or origin. **Remember: Not everyone who fills out an application will receive a cat. This has more to do with the cat than with the person.**

I, the undersigned, have read and understand and agree to the terms above**

SIGNATURE

DATE

[Your Application will NOT be considered if left unsigned.]

* << Name of Cat(s) interested in >>

*** This Section To Be Filled Out By Precious Paws * (fax 888-775-6490)**
Assisted By: _____ Cat's Fosterer: _____ No Response from Client _____
Approved: Yes _____ No _____ Approved by: _____
If No - Reason _____
Notes & **FULL ADDRESS:** _____
Date Notified: _____
Date of Delivery: _____ To be Delivered by: _____