

# FSPCA QUESTIONNAIRE FOR PROSPECTIVE ADOPTERS

Name \_\_\_\_\_ Are you over 18?  yes  no

Address \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Are you interested in a particular dog/cat?  yes  no  
 If yes, please name, and explain why you chose this one: \_\_\_\_\_

Are you aware that pet ownership is a **15-year commitment**?  yes  no

Can you afford and are you willing to spend the \$300-\$500 annual average cost to maintain a pet with basic care (food, vet exams, shots, flea/tick/heartworm prevention, ID, license)?  yes  no

Describe preferred personality of pet: \_\_\_\_\_

Description of household residents:  
 single  couple  roommates  extended family  
 family with kids: ages \_\_\_\_\_

Main reason for adopting (check only one):  
 companion for self  companion for other pet  
 watchdog  gift  
 protection  running/jogging buddy  
 replacement pet  other \_\_\_\_\_

Will kids be supervised with pet?  yes  no  
 Is anyone in household allergic to animals?  yes  no  
 Is everyone in household aware you want a pet?  yes  no  
 Does everyone approve?  yes  no

Do you own pets now?  yes  no  
 If yes, please list their breeds, ages and sexes on the back.

Which best describes your household?  
 carefree & fun-loving  quiet & laid-back  
 orderly & scheduled  busy with lots of activities

Are all your pets spayed/neutered?  yes  no  
 On the back, please list all pets that you have owned in the past ten years who are no longer with you, and state what happened to them.

Will the pet be kept mostly  inside  outside  
 Where will the pet sleep? \_\_\_\_\_  
 How will the pet exercise? \_\_\_\_\_

Name of veterinarian \_\_\_\_\_  
 Phone number of vet \_\_\_\_\_

How many hours a day will the pet be alone? \_\_\_\_\_  
 What method of housetraining will you use? \_\_\_\_\_

For DOGS: what traits are necessary in your new pet?  
 already housetrained  doesn't pull on leash  
 knows basic obedience  rarely barks  
 can be left unattended in-house  doesn't dig  
 can be walked off-leash  doesn't chew  
 low-shedding  good with cats  
 gentle with children  good with other dogs

Are you willing to take pet to trainer if needed?  yes  no

Who will have primary responsibility for daily care? \_\_\_\_\_  
 What method of discipline do you intend to use if pet misbehaves? \_\_\_\_\_

For CATS: what traits are necessary in your new pet?  
 already litter-trained  quiet  
 already de-clawed  good with dogs  
 very affectionate  gentle with children  
 doesn't scratch furniture  playful  
 low-shedding  good with other cats

For what reasons would you give up this pet?  
 house/litter-training difficult  hyperactive  
 destructive  wanders  
 high vet expenses/pet is ill  bites/aggressive  
 you're moving  other \_\_\_\_\_

How would you rate your general knowledge of this type of pet?  
 high  moderate  little to none

Do you have objections to our checking your property to determine suitability of pet ownership?  yes  no  
 Performing periodic follow-up?  yes  no  
 If no, please give directions \_\_\_\_\_

How long have you been actively looking for a new pet?  
 A) just today \_\_\_ B) # of days \_\_\_\_\_ C) # of weeks \_\_\_\_\_  
 What have you done to prepare for a new pet? \_\_\_\_\_

Do you live in:  
 house with yard (fenced?  yes  no)  
 townhouse or condo  apartment

How did you first hear of this pet?  petfinder.com  craigslist.com  
 1-800-save-a-pet.com  Petsmart  friend/family  
 visiting our shelter  Fluvanna Review  \_\_\_\_\_

Do you own or rent? \_\_\_\_\_  
 If rent, does your lease allow pets?  yes  no  
 Is there a weight limitation?  yes  no  
 Lease expiration date: \_\_\_\_\_  
 Landlord's name and phone number: \_\_\_\_\_

**VIRGINIA LAW STATES THAT YOU MUST PROVIDE ADEQUATE SHELTER, DAILY FOOD AND WATER FOR A DOMESTIC ANIMAL.** Adequate shelter means protection from cold, rain, wind, heat and sun. Also, your dog should be under complete control at all times. At 4 months of age, your dog must be vaccinated against rabies and must be licensed. Cats must also be vaccinated against rabies at the age of 4 months. Initial as read

Are there restrictive covenants, subdivision rules, city or county ordinances regarding pet ownership in your location?  yes  no  
 If yes, describe: \_\_\_\_\_  
 How long have you lived at this address? \_\_\_\_\_  
 If you plan to move, what will you do with pet? \_\_\_\_\_

Have you ever taken an animal to a shelter?  yes  no  
 If yes, explain \_\_\_\_\_

I certify the above statements to be true \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_