

**DOG ADOPTION APPLICATION FORM**

By filling in this form you will help us choose the right home for the pet and the right pet for your home.



In order to be considered as an adopter you must:

- 1) Be over 18 years of age
- 2) Show proof of address
- 3) Give written consent from your landlord/body corporate
- 4) Be in a financial position to spend money on veterinary treatment and necessary training
- 5) Have the time to spend with the pet
- 6) Accept that the deposit is non-refundable

Dog:	Case No:	Kennel No:
Breed:	Sex:	Age:

Name of Applicant:

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Home Address:

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Cell No: ..... Home No: .....

Work No: ..... ID No: .....

Employers Name: .....

Applicants Occupation: .....

Partners Occupation: .....

1) Is your spouse/partner in agreement with the adoption of this dog? .....

2) Do you have your own transport? .....

3) Why do you want to adopt a dog?

Watchdog..... Companion ..... Child's pet .....

Companion for other pet ..... Gift.....

Other reason? .....

Website: <http://www.spca-tlwa.com>  
e-mail: [feedback@spca-tlwa.com](mailto:feedback@spca-tlwa.com)  
[enquiries@spca-tlwa.com](mailto:enquiries@spca-tlwa.com)  
1st Avenue  
Grassy Park  
P.O. Box 3  
Plumstead  
7801

021-700 4140  
021-705 2127



4) If you said watchdog, please explain.....

5) Can you afford the services of a private vet? .....

6) Who is your vet? ..... Tel No:.....

7) Are there children in the household, what are their ages? .....  
Is a new baby expected.....

8) Does anyone in your household have allergies? .....

9) Are there elderly folk in your household? .....

10) Have you owned a dog/cat before? Yes ..... No .....

11) Do you own any pets at present? Yes ..... No .....

If so, please list them:

Breed	Name	Age	Sex	Sterilized
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12) Please list pets you had prior to this.

Breed	How long did you own it?	What happened to it If deceased, give details please
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13) Have you ever had to give a dog away? If so, why? When and to Whom?

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- 14) For how many hours will the dog be left unattended? .....
- 15) Where will you leave the animal when you are not at home?  
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- 16) How many hours per day will your pet be indoors? .....
- 17) Where will your pet sleep at night? .....
- 18) Do you have a swimming pool? Yes ..... No .....  
(a) Is it enclosed? Yes ..... No .....
- 19) Who will be the primary caregiver? .....
- 20) How often do you go away, and what will you do with you pet while on holiday?  
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- 21) How often and where will you walk your dog? .....
- 22) What is your home atmosphere like?  
(a) Lots of activity/traffic ..... (b) Some activity ..... (c) Quiet .....
- 23) Your ideal dog? Breed type/mix .....
- (a) Age: Puppy ..... Teenager ..... Adult .....
- (b) Size when adult: Small ..... Medium ..... Large .....  
XLarge .....
- (c) Coat: Short ..... Medium ..... Long .....  
No preference .....
- (d) Exercise requirements: Low..... Medium ..... High .....
- (e) Sex: Male ..... Female ..... No preference .....
- 24) Would you be prepared to take your dog for training? Yes ..... No.....
- 25) Do you live in a: House ..... Flat .....
- 26) Do you own..... or rent ..... the property

**IF YOU ARE RENTING, PLEASE PROVIDE US WITH A LETTER FROM THE LANDLORD GIVING YOU PERMISSION TO HAVE A DOG. (INCLUDING THE LANDLORD'S NAME AND TELEPHONE NUMBERS)**

- (a) How long do you intend renting this accommodation? .....
- 27) How large is your property in square meters? .....
- 28) Are you prepared to provide a kennel for the dog? Yes ..... No .....
- 29) What type of boundary fence do you have? .....
- 30) How high is that fence at the lowest point? .....
- 31) How much do you think it is going to cost you to take care of a dog?  
Eg. Food, flea control, deworming, vaccinations, vet's bills etc.  
On a monthly basis? .....
- 32) What kind of dog food are you going to feed the dog? .....
- 33) Describe the area where you expect your dog to go to the toilet.....  
.....
- 34) When you open your driveway gates will your dog be safely behind another barrier? .....
- 35) Have you ever approached another organization to adopt a pet?  
YES or NO  
If so please state which.....
- 36) Are you agreeable to one of our staff members doing a post home check after you have adopted the dog? .....

**STAFF COMMENTS:**

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**IMPORTANT**

Although we vaccinate, de-worm and thoroughly examine the pets before they go to their new homes, we cannot guarantee that they will not be carrying an illness that has not yet manifested.

We urge you to consult your Vet and inform him/her that you intend adopting a dog/cat from a welfare organization and ask him/her to check that your pets Vaccinations are up to date.

It is also strongly recommended that you ask your Vet to give an additional Vaccination for kennel cough for dogs and snuffles for cats.

**YOUR PETS NAME** \_\_\_\_\_ **AGE** \_\_\_\_\_ **DATE OF LAST VACCINE**

(In the case of a pup/kitten  
Give all dates.)

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In the case of a pup/kitten, we advise that you wait for a month after the third vaccination.

I have read this not and understand that I cannot hold the SPCA responsible if one of my other pets fall ill.

**NAME** ..... **SIGNATURE** ..... **DATE** .....