Animal Care and Control

Adoption Interview

Date: Time: _____

Name: Phone Number:

Street Address:

Mailing Address:

City: State: Zip:

PLEASE ANSWER ALL QUESTIONS BELOW

1. Breed & age of animal requested:

2. Reason for wanting this animal: guard dog, family pet, companion for older individual, etc.

3. Have you owned animal(s) in the past? ☐ Yes ☐ No

   How many & what type(s)?

   What Happened to them?

4. Do you have animals now? ☐ Yes ☐ No

   How many & what type(s)?

5. Do you have a Fenced Yard? ☐ Yes ☐ No

   If Yes: ☐ Front Only ☐ Back Only ☐ Both

6. Do you have children? ☐ Yes ☐ No

   How many? Ages?

7. Are you employed? ☐ Yes ☐ No

IF APPROVAL FOR AN ADOPTION IS GRANTED, I AGREE TO HAVE THE ANIMAL SPAYED OR NEUTERED AND VACCINATED AGAINST ALL APPLICABLE DISEASES. I ALSO AGREE TO HAVE THE ANIMAL VACCINATED FOR RABIES AND LICENSED WHEN IT BECOMES FOUR MONTHS OF AGE OR NOW IF OLDER THAN FOUR MONTHS OF AGE IN ACCORDANCE WITH THE PINAL COUNTY ANIMAL CARE AND CONTROL ORDINANCE #71395. FAILURE TO COMPLY WILL RESULT IN CITATIONS BEING ISSUED.

Signature: _____ Date: _____