



KETCHIKAN GATEWAY BOROUGH

1900 FIRST AVE • KETCHIKAN, ALASKA 99901
• 907/228-6660 • fax 907/228-6679

DEPARTMENT OF ANIMAL PROTECTION

ADOPTION APPLICATION

ADOPTORS MUST BE 18 YEARS OF AGE OR OLDER

Thank you for considering the adoption of a shelter animal. Before you decide to adopt a pet, please consider the time, effort and funds (estimated at \$1000 or more annually for food, supplies, vaccinations, and veterinary care) necessary to properly maintain an animal. Responsible pet ownership requires a commitment to provide care and companionship for the life of the animal. The decision to adopt a pet is an important one. In order to insure that you and your pet will be happy for years to come, we need to make time to discuss your and the animal's individual needs and personality traits. Please take a few moments to carefully read and complete this application.

PERSONAL INFORMATION:

1. Name of animal of interest: _____ Log # _____
2. Adoptor's full legal name: _____
3. Mailing address: _____
4. Physical address: _____
5. City: _____ State: _____ Zip: _____
6. Primary phone #: _____ Work phone #: _____
Cell phone #: _____
7. Email address: _____
8. Driver's license #: _____ State of issuance: _____

HOUSING INFORMATION:

1. Do you currently live in a: House Apartment Condo Other
2. Do you currently: Own Rent Lease
3. If you are not the property owner, Ketchikan Animal Shelter will verify your residence's current pet policy. Please provide the following information:
Landlord's name: _____ Landlord's phone #: _____
If residing in a condominium, please provide proof of permission from the homeowners association, and the contact information.

FAMILY INFORMATION:

1. How many adults live in your home? _____ How many children? _____ Ages? _____
2. Does anyone in your household have animal allergies? Yes No
3. If "yes", is the individual being treated for the allergies? Yes No
4. Who will be primarily responsible for the care of this animal? _____
5. Is this animal a gift for someone else? Yes No
6. Has anyone in the household been convicted of violating KGBC 6.30.010 (inhumane treatment) and/or have been convicted of animal neglect or cruelty within the State of Alaska or any other state? Yes No
If "yes", please identify the state: _____

- 7. Do you have any outstanding fines, taxes or fees owing to the Ketchikan Gateway Borough? ____Yes ____No
- 8. Has anyone in the household been convicted of domestic violence within the past five years or had a domestic violence restraining order granted by the court within the last two years? ____Yes ____No
- 9. How many cats do you currently own? _____ How many dogs? _____

ANIMAL CARE INFORMATION:

- 1. At what address will your animal be residing? _____
- 2. How many hours will the animal be alone at the residence each day? _____
- 3. Where will the animal be housed during the day at that residence? _____
- 4. Where will the animal be housed at night? _____
- 5. If your animal becomes ill or injured, are you in a position to provide veterinary care?
 ____Yes ____No
- 6. Do you have a regular veterinarian? ____Yes ____No Name: _____
- 7. If you are placed in a position where you are no longer able to care for the animal, what arrangements would you provide to ensure that the animal would be responsibly cared for?

LIST OF CURRENT AND PREVIOUSLY OWNED ANIMALS:

Please list all of the pets you have had in the last five years, including current pets and those you no longer own:

STATEMENT OF ADOPTION:

Species	Breed	Age	Gender	Altered	Owned how long?	What happened to the animal?

I hereby acknowledge submission of this adoption application for the animal described in the document. I understand that no warranty is made in regards to the animal, whether as to ownership or condition, and that you can only provide such information as you have received in regards to the animal. If the adoption application is approved, and I take ownership of the animal, I attest to the following: if at any time I cannot care for the animal any longer, I can surrender the animal to the Ketchikan Gateway Borough Department of Animal Protection (making no charges of any type for licensing, food, care, etc.), independently find a responsible person to adopt the animal, or place the animal in a reputable animal rescue. I will not, under any circumstance, abandon the animal. I shall be personally responsible for the humane care and control of the animal, and I agree that I will abide by all Ketchikan Gateway Borough Code Title 6.

Signature: _____ Date: _____

Amount tendered: \$ _____

Officer signature: _____ Date: _____

Officer name (please print): _____

KETCHIKAN GATEWAY BOROUGH DEPARTMENT OF ANIMAL PROTECTION

OFFICE USE ONLY

ANIMAL DESCRIPTION:

CAT: _____ DOG: _____ MALE: _____ FEMALE: _____ AGE: _____ BREED: _____

COLOR: _____ PREVIOUSLY SPAYED/NEUTERED: _____ LICENSE #: _____

HAS RABIES VACCINATION? yes no underage RABIES TAG # IF "YES" _____

RABIES VOUCHER # IF "NO" _____

Application: _____ Approved _____ Denied

Animal Protection Department Representative name: _____

Animal Protection Department Representative signature: _____

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Date: _____

Microchip #: _____

OWNER NAME: _____

OWNER PHYSICAL ADDRESS: _____

OWNER MAILING ADDRESS: _____

OWNER HOME PHONE NUMBER: _____

OWNER CELL PHONE NUMBER: _____

ANIMAL NAME: _____ LOG #: _____