



Columbiana County Humane Society

PO Box 101
 1825 South Lincoln
 Salem, OH 44460
 234-575-7177

Cat Adoption Application

To help us make the best match for you and your family, please complete this form as accurately as possible.

Date: _____

Animal Name(s): _____

Columbiana County Humane Society takes in abused, neglected, and abandoned animals; as well as those that are sometimes ordered removed by the courts. We make every attempt to screen our animals for health, behavior, and temperament issues. Certain types of problems may not demonstrate themselves until the animal is in a home environment.

For these reasons we cannot guarantee the behavior, health, or temperament of any animal.

First and Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Primary Phone Number: _____ Secondary Phone Number: _____

Email: _____

Type of Residence: House Duplex Apartment Condo Mobile Home Other _____

Do you: Rent Own Live with friends/family

How long have you lived there? _____ First time cat owner, as an adult? Yes No

If renting, landlord's name/phone number: _____

Do you currently have other pets? Yes No

Number of adults (>18) in the household and ages: _____

Number of children (<18) and ages: _____

Please list any animals you currently live with OR have owned in the past three years:

Animal's Name	Age	M/F	Breed	Spayed/Neutered	Still Own?	If no, why?

Who is OR was your veterinarian (name/number if available): _____

Anyone in your household have any medical conditions and/or currently on blood thinners? Yes No

Describe the type of cat desired (long/short fur, bigger/smaller, polydactyl, etc.):

Sex: Male Female No Preference

Age: As young as _____ As old as _____ No Preference

Qualities you want in a cat (circle all that apply):

Mouser	Active/fun cat	Shy	Friendly	Good with dogs
Lap cat	Curious	Quiet	Talkative	Companion for
Declawed	Climber	Gentle	Good with kids	other cat

Other: _____

Do you plan to declaw your new cat, if not already declawed? Yes No

Would your new cat have any of these as neighbors or visitors (circle all that apply):

Children <10 Teenagers Dogs Female cats Male cats Small animal (pets) Pet birds

What are some training needs that you do not wish to encounter (circle all that apply):

Shy Scratching Stubborn Biting Inappropriate clawing Jumps on counter

Noisy/vocal Escaping Poor litter box habits Other: _____

There are some behaviors that will require patience, formal training, or prior cat experience. If your new cat does display any of those behaviors listed above, how will you go about teaching him/her?

Contact a professional Use a book Google Personal knowledge Other: _____

How would you describe your household?

Very active Lots of kids visit Some activity Frequent adult visitors Quiet Other: _____

Approximately how many hours a day will your new cat spend: Indoors _____ Outdoors _____

Where will your new cat sleep at night: Indoors Outdoors

What do you do for a living? _____

What is your source of income? _____

If employed, employer name and number? _____

There are additional expenses for pets for routine care and possibly unexpected medical costs. Are you prepared to be financially responsible for your new pet? Yes No

It may take a few weeks for a new pet to adjust to a different environment. It may even be required to temporarily separate animals so they can be introduced properly. Are you prepared for this adjustment time? Yes No

In a new environment, it is hard to determine if an animal is housebroken. Will you be able to tolerate accidents in the house? Yes No

What solution will you try if your new cat isn't using the litter box each time (circle any that apply):

Try a different litter Add another litter box Clean litter box Move litter box to a new location
Use a cat door None Other: _____

Are all household/family members in agreement about adopting a cat? Yes No

Have you, or any member of your household/family been subject to legal action for cruelty to, neglect of, or abandonment of an animal? Yes No

Are you willing to submit to a home check? Yes No

What are some topics you would like to discuss with your Adoption Coordinator?

I understand that purposeful falsification of the information contained in this form will result in automatic denial of an adoption, or subsequent confiscation of already adopted pet(s). I certify that the information I have provided herein is accurate and I authorize the Columbiana County Humane Society (CCHS) to investigate all statements made on this questionnaire. I understand that CCHS makes no representation or guarantee about any animal's temperament, behavior, health, or any combination thereof. CCHS is not held liable for any future injury or damage, which may be caused by any adopted animal, nor is CCHS responsible for any illness or medical malady which may befall the animal subsequent to adoption.

CCHS reserves the right, at our sole discretion, to refuse any applicant for any reason.

Signature

Date

Signature of Adoption Coordinator

Date

For Columbiana County Humane Society Staff Use Only

Comments:

Approved Denied (explain)