



## A New Beginning Animal Rescue Adoption Application

p. 516-322-5865 ♥ NBRescue.org

\*Return application via email to [newbeginningresq@aol.com](mailto:newbeginningresq@aol.com)

Thank you for your interest in adopting a dog! Before you fill out this application, please remember that adopting a dog is a **serious decision** and a **lifetime commitment**. We ask that you consider the responsibility involved with welcoming an animal into your family. Having a pet brings considerable **financial obligations** not only for regular maintenance, but also for illness or injuries that may occur during your pet's lifetime.

Important: The information included in this application must be accurate. If any information is found to be false, no matter how minor, it will result in our not approving your application and not allowing adoption in the future. Note, all household members must be included in the decision to adopt.

### *Required items for adoption:*

- Must be 25 years of age
- Either identification showing ownership of home or landlord's consent
- Fenced in yard

### **Applicant Information:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Best Time to Call: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Best Time to Call: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ State Issued: \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Employer Phone: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

**Desired Pet Information:**

Name of Pet You're Inquiring About (If Applicable): \_\_\_\_\_

Breed Desired: \_\_\_\_\_ Age: Puppy \_\_\_\_\_ Adult \_\_\_\_\_ Senior \_\_\_\_\_

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_ Good With: Kids \_\_\_\_\_ Dogs \_\_\_\_\_ Cats \_\_\_\_\_

Are you open to a dog with special needs? \_\_\_\_\_

**Home Information:**

Living Situation: Own \_\_\_\_\_ Rent \_\_\_\_\_ Live With Parents \_\_\_\_\_ Other: \_\_\_\_\_

Home Type: House \_\_\_\_\_ Condo \_\_\_\_\_ Co-op \_\_\_\_\_ Apartment \_\_\_\_\_ Other: \_\_\_\_\_

How long have you lived at your current address? \_\_\_\_\_

Do you plan to move anytime soon? \_\_\_\_\_

Yard: Fenced \_\_\_\_\_ If so, how high is the fence? \_\_\_\_\_ Open \_\_\_\_\_ Dog Run \_\_\_\_\_

Other: \_\_\_\_\_

Do you have a terrace or a balcony? \_\_\_\_\_ If yes, is it enclosed? \_\_\_\_\_

Pool: Inground \_\_\_\_\_ If yes: Safety Gate \_\_\_\_\_ Fence \_\_\_\_\_ Other \_\_\_\_\_

Above Ground \_\_\_\_\_ If yes: Safety Gate \_\_\_\_\_ Fence \_\_\_\_\_ Deck \_\_\_\_\_ Pool Stairs \_\_\_\_\_

Do you have stairs, either inside or outside? \_\_\_\_\_

What living arrangements will be made for your new dog?

\_\_\_\_\_  
\_\_\_\_\_

Where will your new dog be kept when alone? \_\_\_\_\_

Where will your new dog sleep at night? \_\_\_\_\_

Do you agree to a home inspection by our rescue? \_\_\_\_\_

If you need to move, are you willing to take your pet with you? \_\_\_\_\_

**Renter Information:** (If you rent, please fill out the following.)

Do you have approval from your landlord to adopt? \_\_\_\_\_

Any restrictions? \_\_\_\_\_

Does your rental agreement restrict the type of pet you may own? (i.e.. Breed, size, etc.) \_\_\_\_\_

If yes, please advise: \_\_\_\_\_

Landlord's Name (First & Last): \_\_\_\_\_ Phone: \_\_\_\_\_

Landlord's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## Household Information:

Please list all people living in your residence:

Name	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are all members of your household in agreement of adopting a dog? \_\_\_\_\_

Does anyone in your home have allergies to animals? \_\_\_\_\_

If yes, please provide details: \_\_\_\_\_

For whom are you adopting this animal? Myself \_\_\_\_ My Children \_\_\_\_ A Gift \_\_\_\_

Why do you want this animal?

\_\_\_\_\_

\_\_\_\_\_

Who will be the primary caregiver of this animal? \_\_\_\_\_

Who will be financially responsible for this animal? \_\_\_\_\_

Can you financially afford to provide veterinary care for your dog? \_\_\_\_\_

What do you believe is your monthly budget for veterinary care? \_\_\_\_\_

If the primary caretaker becomes ill, who will care for this animal? \_\_\_\_\_

Name (First & Last): \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Do any members of your household require a wheelchair, cane, etc.? \_\_\_\_\_

\*We ask this question as some animals may be scared and need assistance in adjusting to these items.

What is your level of household activity? Very Active \_\_\_\_ Moderate \_\_\_\_ Calm \_\_\_\_

Do all adults work full-time? \_\_\_\_\_ Are any working from home or hybrid? \_\_\_\_\_

How many hours a day are you gone from the home? \_\_\_\_\_

How many hours a day will your dog be alone? \_\_\_\_\_

Do you travel often? \_\_\_\_\_

Who will care for your pet when you travel? \_\_\_\_\_

Please list all animals owned over the last ten years:

Type/Breed/Name	Gender	Age	Spayed/ Neutered	Living/ Deceased	Vet used?

Are your pets current on their vaccinations? \_\_\_\_\_

Do your pets get along with other dogs? \_\_\_\_\_

How many dogs have you owned in the past? \_\_\_\_\_

Have you ever taken a pet to the shelter? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

Have you ever had a pet lost or stolen? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

Have you ever had to retrieve a pet from animal control/shelter? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

Have you ever had a pet be hit by a vehicle? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

Dogs can live between approximately 12 to 18 years of age. Are you willing to devote this much time to caring for an animal? \_\_\_\_\_

### **Veterinarian Information:**

Do you have a local veterinarian you plan to use? \_\_\_\_\_

Do we have permission to contact them? \_\_\_\_\_

Veterinarian's Name/Practice: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Records are under what name? \_\_\_\_\_

**Groomer Information:**

Do you have a local groomer you use? \_\_\_\_\_ Do we have permission to contact them? \_\_\_\_\_

Groomer's Name/Business: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Records are under what name? \_\_\_\_\_

**Personal References:** (Please no family members.)

Reference #1 (First & Last): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Reference #2 (First & Last): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Reference #3 (First & Last): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Please provide any other information you would like to share for the purpose of reviewing your application:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By signing this application, I certify that the information provided in this form is true and accurate to the best of my knowledge. I am aware that the completion of this application does not guarantee the approval to adopt a dog from our rescue. I give the rescue permission to contact my veterinarian and give the veterinarian permission to release all information on my current and previous pets to the rescue. In signing I am also giving permission to call my references and landlord should that apply. I understand that this is the first step in the adoption process and, if this application is approved, I will have a home inspection, fill out an adoption contract and pay an adoption fee in order to finalize this process.

Sign: \_\_\_\_\_ Date: \_\_\_\_\_