

ADOPTION APPLICATION
Dinwiddie Animal Control/Pound
P.O. Drawer 70
Dinwiddie, VA 23841
804-469-4547

Please print the information on this application; accuracy is important:

Name: _____ **STERILIZE BY:** _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Email Address (if you have one): _____

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1. Do you live in a Mobile Home Park? _____ If "yes", please provide a letter from the park owner or manager stating that pets are permitted.
 2. Do you rent? _____ If "yes", please provide a letter from the landlord stating that pets are permitted.
 3. Fenced yard? _____
 4. Will the animal be indoors or out? _____
 5. If the animal will be outdoors, describe the shelter that you will provide. _____
 6. Are you aware that during the first year, routine vet expenses may range from \$150.00-\$200.00?

 7. Have you ever turned any animals in to the shelter? _____
 8. If "yes", reason? _____
 9. Have you ever adopted from a shelter before? _____
 10. If you have, was the animal sterilized after adoption? _____
 11. Have you ever been convicted of animal cruelty, failure to provide, or neglect?

 12. Do you have other animals? _____ What kind? _____

 13. Do you have a veterinarian? _____ If "yes", please provide the name and address,

DINWIDDIE ANIMAL CONTROL RESERVES THE RIGHT TO DENY ADOPTION TO ANYONE WHO, IN ITS OPINION, WILL NOT PROVIDE A SUITABLE AND RESPONSIBLE HOME FOR THIS PET.

I HAVE BEEN PROVIDED WITH A COPY OF "THE DUTIES OF OWNERS" AND I AGREE TO READ THESE AND ABIDE BY THEM.

I UNDERSTAND AND CONSENT TO DINWIDDIE ANIMAL CONTROL TO CONFISCATE ANY PET I ADOPT IF I HAVE MADE A FALSE STATEMENT ON THIS APPLICATION OR I HAVE FAILED TO COMPLY WITH STERILIZATION.

I AUTHORIZE VERIFICATION OF ALL STATEMENTS IN THIS APPLICATION WITH VETERINARIAN/REFERENCES/LANDLORD.

ALL OF THE ANIMALS THAT ARE READY FOR ADOPTION HAVE BEEN CAREFULLY OBSERVED FOR HEALTH AND TEMPERMENT PROBLEMS. DINWIDDIE ANIMAL CONTROL, HOWEVER, MAKES NO GUARANTEES OR REPRESENTATIONS AS TO THE TEMPERMENT, HEALTH OR THE PHYSICAL CONDITION OF THE ANIMALS PROVIDED FOR ADOPTION.

AN ADOPTION FEE OF **\$75.00 FOR DOGS, \$45.00 FOR CATS**, WILL BE CHARGED THE DAY OF ADOPTION. THIS FEE COVERS **\$55.00 FOR STERILIZATION OF A DOG, \$30.00 FOR STERILIZATION OF A CAT, \$8.00 FOR RABIES, FIRST IMMUNIZATION SHOT** MAY BE GIVEN (AT THE POUND), WORMING (AT THE POUND), AND ADOPTION FEE. **ANY EXTRA EXPENSES INCURRED AT THE VET'S WILL BE THE SOLE RESPONSIBILITY OF THE ADOPTER.** IF THE ANIMAL DOES NOT WORK OUT IN THE NEW HOME OR IS FOUND TO BE UNHEALTHY, IT MAY BE RETURNED WITHIN 7 DAYS TO THE SHELTER FOR A FULL REFUND. AFTER 7 DAYS THERE WILL BE NO REFUNDS AND STERILIZATION MUST BE DONE WITHIN THE ALLOTTED TIME. IN THE EVENT THE ANIMAL DIES WITHIN THE 7 DAYS, THE BODY MUST BE RETURNED TO THE SHELTER FOR VERIFICATION. AN ANIMAL RUNNING AWAY IS NOT VERIFIABLE THEREFORE NO REFUND CAN BE MADE AND THE ADOPTION FEE WILL REMAIN IN THE STERILIZATION PROGRAM FUND.

BY SIGNING THIS APPLICATION, I AGREE TO HAVE THE ANIMAL STERILIZED, IF NEEDED, ACCORDING TO VIRGINIA STATE CODE, SECTION 3.2-6574 REQUIRING ALL DOGS AND CATS ADOPTED FROM THE POUND, BE STERILIZED BY A LICENSED VETERINARIAN WITHIN 30 DAYS OF ADOPTION IF THE ANIMAL IS SEXUALLY MATURE, OR WITHIN 30 DAYS AFTER THE ANIMAL REACHES 6 MONTHS OF AGE, IF THE ANIMAL IS NOT SEXUALLY MATURE AT THE TIME OF ADOPTION. FAILURE TO DO SO SHALL BRING ABOUT A CIVIL ACTION IN THE GENERAL DISTRICT COURT AGAINST THE NEW OWNER. THE NEW OWNER MAY BE COMPELLED TO COMPLY. AS THE NEW OWNER OF A DOG OR CAT ADOPTED FROM THE DINWIDDIE ANIMAL SHELTER, I AGREE TO COMPLY WITH THE REQUIREMENTS OF THE VIRGINIA STATE CODE STATED ABOVE AND INNOCULATE FOR RABIES BY 4 MONTHS OF AGE, PURCHASE COUNTY DOG LICENSE, IF APPLICABLE, AND TO PROPERLY CARE FOR MY NEW PET. I AGREE TO NOTIFY THE POUND, IN WRITING, IN THE EVENT THE ANIMAL DIES OR RUNS AWAY WITHIN 7 DAYS OF DYING OR RUNNING AWAY.

Adopter's signature: _____

Pet's DC# _____
Breed: _____
Name: _____
Color: _____
Age: _____

Dinwiddie Animal Shelter representative: _____

Date: _____

NO FOOD/WATER AFTER 6:00PM THE NIGHT BEFORE STERILIZATION

**ADOPTION FEE COVERS: 1ST DHL...GIVEN AT SHELTER
WORMING...GIVEN AT SHELTER
STERILIZATION AND RABIES SHOT**