

Chautauqua County Animal Shelter Adoption Application

Please complete all of the questions if you are interested in adopting.

Make a copy of the records before you given them to the adopter.

Personal Information:												
Name:												
Address:												
City:		State:		Zip Code:								
Home Phone:		Cell:										
Email:												
Date of Birth:		_										
Requirements:												
Adopter must have identif	ication and provide t	their correct nam	e and address	. A copy of their Drivers								
License will be kept with th	·			• •								
Adoptive homes must have a fenced yard unless they are adopting a dog that will be kept insdie and walked on a leash. Dogs will be adopted only as household pets, NOT as guard dogs. Animals may not be adopted as a gift to someone outside the immediate family, and the animal must reside at the adopter's address. All animals must be spayed or neutered as required by State Law.												
								Do you agree to the above	requirements?			
								Adopter Signature				
								Chautauqua County Ani	mal Shelter to co	mplete this sec	ction	
Is this applicant approve	zd?	Yes		No								
Chautauqua County Anim	nal Shelter Signati	ıre										
Animal Adoption Inform	ation:											
Please circle: Dog		Cat										
Animal Name:												