



Owasso Police Department

500 South Main Street, Owasso, Tulsa County, Oklahoma 74055
Phone (918)-272-2244 Division (918) 272-4965 Fax (918)-376-1589
E-Mail address: Animalshelter@CityofOwasso.com



ANIMAL CONTROL DIVISION

ADOPTION APPLICATION

THE OWASSO ANIMAL CONTROL OFFICERS WILL BE THE FINAL AUTHORITY FOR ALL ADOPTIONS AND RESERVE THE RIGHT TO DENY ANY APPLICATION.

UPON APPROVAL THE ANIMAL WILL BE TENTATIVELY SCHEDULED FOR SPAY/NEUTER SERVICES. DATE AND TIMES ARE SUBJECT TO CHANGE!

Name: _____ Date: _____
Address: _____ City: _____ Zip: _____
Home Phone # _____ Work Phone # _____
Drivers License # _____
Email Address: _____

What animal are you interested in? _____

What age animal are you looking for? []Puppy/Kitten []Junior []Adult []Senior

Why do you want to adopt at this time? _____

Is this animal for someone else? _____

Please check the qualities are you looking for in an animal? []Male []Female []Long Haired
[]Short Haired []Calm []Active []OK as only pet []Good with dogs
[]Good with cats []Good with kids

Other qualities desired? _____

What is the intended purpose of this animal? []Companion for myself []Companion for kids
[]Playmate for another pet []Gift []Other

What kind of lifestyle do you want your animal to live? []Strictly Indoor []Mostly Indoor W/ some Outdoor
[]Indoor/Outdoor []Strictly Outdoor

Have you researched the breed/type of animal you are adopting? _____

Do you have any of the following? []Screened Porch []Fenced Yard []Pet Door []Pool

How would you describe your home? []Calm & Quiet []Party every night []Somewhere in-between

I want an animal that seeks attention: []All the time []Some of the time []Occasionally

How many hours a day will animal be left alone? []More than 9 Hours []Less than 9

Who is your current Veterinarian? _____ Phone # _____

Who will be primarily responsible for the care of the animal? _____ Age? _____

List all the pets currently living in your household:

(1) Name and Species: _____

Spayed/Neutered

Indoor Outdoor Indoor/Outdoor On Chain

Is shelter provided? Yes No

Age of animal? Puppy/Kitten Junior Adult Senior

Current on Rabies vaccination? Yes No One year vaccine Three year vaccine

** Required by Oklahoma State Law

Current on heartworm prevention? Yes No Not sure

Brand of heartworm prevention? _____

(2) Name and Species: _____

Spayed/Neutered

Indoor Outdoor Indoor/Outdoor On Chain

Is shelter provided? Yes No

Age of animal? Puppy/Kitten Junior Adult Senior

Current on Rabies vaccination? Yes No One year vaccine Three year vaccine

** Required by Oklahoma State Law

Current on heartworm prevention? Yes No Not sure

Brand of heartworm prevention? _____

(3) Name and Species: _____

Spayed/Neutered

Indoor Outdoor Indoor/Outdoor On Chain

Is shelter provided? Yes No

Age of animal? Puppy/Kitten Junior Adult Senior

Current on Rabies vaccination? Yes No One year vaccine Three year vaccine

** Required by Oklahoma State Law

Current on heartworm prevention? Yes No Not sure

Brand of heartworm prevention? _____

Household Members Information

Are there any children under the age of six (6)? Yes No

** (Small breed dogs are not usually suitable for households with small children)

Are any members of your household allergic to animals? Yes No

Do all family members agree with getting a new animal? Yes No

Do you own or rent your residence? Own Rent Leasing

If you rent/lease does the landlord permit animals to be kept on the property? Yes No

Have you ever relinquished an animal to a shelter before? Yes No

If renting have pet deposits been paid? Yes No Not Required

Landlord's name and contact number: _____

Are there any of the following situations where you might give away your animal?

- Moving
- Having baby
- Destructive
- Too expensive
- Suddenly became allergic
- Getting Divorced or Married
- Fleas/sheds too much
- Children will no longer take care of animal
- Want younger animal current one is too old
- Not housetrained
- Aggressive
- Just don't animal anymore
- Landlord does not allow animals
- Tired of taking care of animal
- Other _____

Are you prepared for the financial responsibility (\$500 + per year)? Yes No Not Sure

** Average cost of owning an animal to age 14 = \$15,000.00.

Are you willing to provide your animal with annual visits to a veterinarian? Yes No

Are you prepared to make a lifetime commitment to this animal (15 to 20 years)? Yes No

Have you ever applied to adopt an animal from the Owasso Animal Shelter before? Yes No

If Yes, was your application: Approved Denied

Have you ever applied to adopt from any other private or public pet adoption organization? Yes No

If Yes, was your application: Approved Denied

Are you aware of your local Animal Control Laws and Ordinances? Yes No

About the Spay & Neuter Program

The Owasso Animal Shelter is committed to the idea that no animal that is capable of producing offspring will be adopted from the Shelter without having been spayed or neutered. The goal of this program is to reduce the number unwanted animals within the City of Owasso. In order to achieve this goal the City of Owasso and local veterinarians have entered into a partnership to provide a surgery room within the Shelter that will allow veterinarians to spay and neuter adopted animals at the shelter at a reduced cost to the public.

Adoption of Animals

In order to keep costs at a minimum, only a limited amount of veterinarian services will be provided to the animal at the time of adoption. For canines services include a visual exam, heartworm test, age appropriate vaccinations, and spay/neuter. For felines services include a visual exam, feline AIDS/Leukemia test, age appropriate vaccinations, and spay/neuter. If the citizen desires additional testing of an animal before a spay/neuter is conducted then they may make arraignments, including payment, with the veterinarian for that service. No refunds will be available for any service not described in this waiver.

Refunds

In the event that an animal is adopted from the shelter and is diagnosed with a terminal or serious life threatening illness within 45 days of the adoption the animal may be surrendered to the shelter and a refund for the adoption fee will be made. Diagnosis of a terminal or serious life threatening illness must be made by a qualified veterinarian and evidenced in writing. If at the time of the adoption a Shelter veterinarian diagnosis an animal with an illness then the citizen will be notified as to the problem and given the option as to whether or not to proceed with the adoption. If the citizen chooses to continue the adoption process no refund will be given at a later time based on the previously diagnosed illness. No refunds or reimbursement will be made for any veterinarian expenses incurred as a result of any illness or injury of the adopted animal. Refunds are not available for animals that are returned to the shelter due to behavioral problems or other problems involving incompatibility with other animals or persons.

Hold Harmless

The City of Owasso Animal Shelter makes a substantial effort to assure that adoptable animals are in good health. All adopted animal given a basic health evaluation. It is possible that undetectable illness or condition may be present or incubating at the time of adoption. It is possible for hazardous diseases, insect infestations and/or viruses to be transmitted to other pets or people in the home.

The City of Owasso Animal Shelter/Control and its representatives do not make any guarantee as to age, behavior, breed, health, temperament or ultimate size of any animal. The City of Owasso Animal Shelter/Control and it representatives assume no responsibility or liability for medical or physical problems with the animal or injury to the new owner or anyone else, that may occur after the animal is adopted. It is the responsibility of the person adopting the animal to ascertain exactly what tests, treatments and inoculations have been or need to be performed. It is the responsibility of the adopting person to carry out any additional test or treatments at their own expense.

I, _____, acknowledge that I have read and understand the above adoption information and hold harmless the City of Owasso, All City of Owasso Employees, and Shelter Veterinarians for any illness, injury, behavioral problem that my adopted animal had at the time of adoption or may develop following adoption.

Applicant Signature: _____ Date: _____

Checked By: _____ Approved Disapproved Date: _____
