



# BURBANK ANIMAL SHELTER

## OTHER PET ADOPTION QUESTIONNAIRE

A# \_\_\_\_\_  
 P# \_\_\_\_\_  
 Counselor \_\_\_\_\_  
 Date \_\_\_\_\_

Name \_\_\_\_\_ Phone (Primary) \_\_\_\_\_  
 Address \_\_\_\_\_ Phone (Alternate) \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Email \_\_\_\_\_

Check here to be excluded from BAS email list

Would you like to hear about our Senior for Senior program?  Yes  No

Are you a veteran or active-duty service member?  Yes  No

Which animal(s) are you interested in adopting? A# \_\_\_\_\_ & A# \_\_\_\_\_

### Type of Housing

Do you:  Own  Rent  Parents Own  Parents Rent  
 Do you live in a:  House  Apartment  Condo  Mobile Home  
 Do you live:  Alone  With Partner  With Roommate(s)  With Parent(s)  
 What is your living environment like?  Calm & Hectic  Not Too Hectic  Very Busy

If you rent, may we contact your landlord?  Yes  No

Landlord Name \_\_\_\_\_ Phone \_\_\_\_\_

Names of **adults** in the household:

Names and ages of **children** in the household:

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

Describe all current pets:

Type of Pet	Age	Sex	Spayed/Neutered	Kept in/out?	How long have you owned?

Describe any other pets owned within the last five years:

Type of Pet	Age	Sex	Spayed/Neutered	Kept in/out?	How long have you owned?

Have you ever owned the type of pet you wish to adopt?

Yes  No

Where will the animal be kept?

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

Please describe the type of housing/enclosure the animal will have:

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

*My signature below confirms that all the above information is current, correct, and complete to the best of my knowledge. I acknowledge that I am fully aware that any false or incomplete information is proper grounds for the denial of this adoption.*

Signature \_\_\_\_\_

Date \_\_\_\_\_