



WOODBRIIDGE TOWNSHIP ANIMAL CONTROL
 2 George Frederick Plaza
 Woodbridge, N.J. 07095
 732-855-0600, ext. 5007

ADOPTION APPLICATION

The following information is requested so we can assist you in the selection of a new pet. The animal's welfare is our foremost concern. The consultation process is designed to help us assist you in finding the animal most compatible to your lifestyle.

Animal interested in: _____

Name: _____

Address: _____

City, State, Zip: _____

Phone: (H) _____ (W) _____

E-mail address: _____

Driver's License Number _____

Please complete all the information on the following pages. By signing below, you certify that you understand the following:

1. Woodbridge Animal Control reserves the right to refuse adoption to anyone.
2. The information contained within this application is accurate and not misleading in any way.
3. Woodbridge Animal Control reserves the right to contact any individuals on this form.
4. Woodbridge Animal Control request a person is adopting a pet to be 21 years old and if you rent, letter from your landlord is requested

Date: _____ Signature: _____

*****Please turn and complete the following pages*****

NOTE: If there are multiple applications for one animal, residents of Woodbridge Twp may receive preference over non residents

PLEASE GIVE CAREFUL CONSIDERATION TO ADOPTING A PET. ANIMALS ARE NOT TOYS OR SHORT TERM COMMITMENTS. MAKE SURE THAT YOUR LIFESTYLE ALLOWS THE TIME, PATIENCE AND EXPENSE THIS PET WILL NEED OVER THE YEARS. ANIMALS FOR ADOPTION ARE PLACED WITH ADOPTERS WITH FULL CONSDERATION GIVEN TO THE SPECIFIC NEEDS OF EACH ANIMAL.

-----**FOR WOODBRIDGE ANIMAL CONTROL USE ONLY – DO NOT WRITE BELOW THIS LINE**

Reviewed form _____ Vet check _____

Landlord check _____ approved: YES NO
Report taken by volunteer _____

Last name _____

1. Is this your first experience with a pet? YES NO
2. Do you have other pets at home? YES NO

If yes:
TYPE AGE NAME ALTERED VACCINATED KEPT WHERE
DOG/CAT _____ YES / NO YES / NO IN / OUT
DOG/CAT _____ YES / NO YES / NO IN / OUT
DOG/CAT _____ YES / NO YES / NO IN / OUT

3. If you presently own a cat/kitten, has it been tested for Feline Aids and Leukemia?
(This is NOT a standard procedure done automatically by a veterinarian. You need to
request this blood test to be done.) YES NO
Results of test: POSITIVE NEGATIVE

4. If you don't have pet(s), have you had any in the past? NO / YES (DOG / CAT)
How long did you have your last pet? _____
What happened to your last pet? _____

5. Who is/was your veterinarian? Name: _____
City, State: _____ Tel # _____
Approximately when was your last vet visit? _____

6. How long have you resided at your present address? _____

7. Do you currently live in a: House _____ Apartment _____ Other _____

8. Do you own / rent
If you rent, does your lease allow pets? YES / NO
Landlord's name _____ Tel. # _____

9. How many people live in your household? _____
Do all the adults know you plan to adopt? YES / NO
If there are children in the household, list ages _____

10. Does anyone in your household have any known allergies to animals? YES / NO

11. Where will this pet be kept during the day? _____ Night? _____

12. Is anyone home all day? YES / NO If no, how many hours will the pet be left alone
in a 24 hour period? _____

13. Where will the pet be kept when alone? _____

14. Are you financially prepared to give your pet routine and emergency medical care such as
rabies vaccinations, inoculations, exams for parasites, earmites, etc? YES / NO

15. Would you object to a visit or call from a Woodbridge Animal Control Officer to see how you and your new pet are doing? YES / NO

Last name _____

CAT / KITTEN ADOPTIONS ONLY:

1. Do you want the cat for (check all that apply):
house pet ____ mouser ____ breeder ____ gift ____
companion ____ companion for another pet ____
2. Will the cats be allowed outdoors? YES / NO
3. Do you plan to declaw the cat / kitten? YES / NO
If yes: front only ____ all four ____
4. What will you do if the cat claws furniture or shows other destructive behavior?

5. Do you need an explanation of how to introduce a new cat to your current pet?
YES / NO
6. Are you familiar with types of litter to use? YES / NO
7. Are you familiar with feeding recommendations for a cat? YES / NO

DOG / PUPPY ADOPTIONS ONLY

1. Do you want the dog for (check all that apply):
house pet ____ guard dog ____ watch dog ____ gift ____
breeder ____ companion ____ companion for another pet ____
2. Do you realize you will probably have to housetrain the dog? YES / NO
3. Are you familiar with crate training? YES / NO
4. Are you familiar with leash and licensing laws in your community? YES / NO
5. How will you keep your dog confined to your property? (check all that apply):
in-home kennel ____ fenced yard ____ on chain ____
garage ____ patio ____ on leash ____
6. Do you have a fenced yard? YES / NO
7. What will you do if your dog chews furniture or shows other destructive behavior?

8. Do you need an explanation of how to introduce a new dog to your current pet?
YES / NO
9. Are you familiar with the feeding recommendations for a dog / puppy? YES / NO