

DISTRICT OF TUMBLER RIDGE ANIMAL RESPONSIBILITY BYLAW NO. 692, 2020 SCHEDULE "H"

ANIMAL ADOPTION APPLICATION FORM

APPLICANT INFORMATION				
Name:				
Address:				
Civic Address:				
Mailing Address:				
Phone:	Email:			
BCDL/ID:	Birthdate:			
FOR OFFICE USE ONLY	Date:			
Staff Name:				
Animal's Name:				
GENERAL INFORMATION	YOUR HOME			
1. Who will have the primary responsibility for	1. What type of home do you live in?			
this animal?	□Acreage □House □Apartment			
2. Have you had animals before? □Yes □No	2. Do you: □Own □Rent			
3. What happened to them?	3. Do you have your landlord's/strata's			
	permission to have pets? □Yes □No			
	Please provide us with contact information for			
4. Have you surrendered or given away a pet?	your landlord or a copy of your strata by-laws:			
□Yes □No	Checked by the District of Tumbler Ridge			
	□Yes, please initial:			
If yes, please provide the reason:	4. How many hours will your animal be alone			
	on Weekdays Weekends			

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YOUR PETS						
1. Are there other animals in your household?						
□Yes □No						
If yes, please list them:						
Name Breed Age Sex Fixed?						
Please provide the name and phone number of your vet:						
HONE WOLF						
HOME VISIT						
Are you willing to have a District of Tumbler						
Ridge Animal Control or Bylaw Enforcement						
Officer do a home visit by appointment?						
□Yes □No						
If not, why?						
ONLY						
How many hours of exercise can you give your dog? WeekdaysWeekends						
r dog? WeekdaysWeekends						
r dog? WeekdaysWeekends -leash parks -logging -Cycling -Other						
leash parks □Jogging □Cycling □Other						
leash parks □Jogging □Cycling □Other log will cost you per year?						

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TELL US WHAT YOU ARE LOOKING FOR

□Female	□Male [■No preference				
□Short	□Medium 0	⊒Long	□Non-shedding	□No preference		
□Puppy	□Adult	⊒Senior	□No preference			
□Small	□Medium 0	⊒Large	☐No preference			
Breed/Type/Colour:						
AS YOU ARE WILLIN	IG TO WORK ON					
tion anxiety			□Obedi	ence House training	□Fearfulness	
LIKE MY DOG TO:		VERY IM	PORTANT	QUITE IMPORTANT	NOT IMPORTANT	
ly with children		l l	-			
ly with other dogs		l	-			
ly with cats			-			
ly with me				0		
ly with visitors to th	he house			0		
ng groomed				0		
ng held						
ng petted		l	-			
		ı	-			
l		l l	-			
		ı	-			
endent						
ke me up at night						
Never show aggressive behaviour		-				
SOME DOGS WILL REQUIRE TRAINING		Y	ES	NO	NOT SURE	
dog that is already t	trained					
time dog owner						
edience trained be	fore					
s of experience and log	d could handle a	ı	_		0	
Under what circumstances would you return your dog? Moving Too costly New baby Aggression Medical reasons Not enough time Behaviour problem						
Comments:						
Have all the members of your household met the dog? □Yes □No						
Have you ever been convicted of neglect or cruelty to animals? □Yes □No						
FALSIFIED INFORMATION WILL LEAD TO AUTOMATIC REJECTION OF THE APPLICATION. THE DISTRICT OF TUMBLER RIDGE RESERVES THE RIGHT TO REFUSE ANY APPLICANT						
I understand that it is my responsibility to see and evaluate the animal for myself before agreeing to adoption. The						
information about this animal.						
Applicant signature: Date:						
	DShort Puppy Small pe/Colour: IS YOU ARE WILLING Ition anxiety In to other dogs It willing to work or more information to LIKE MY DOG TO: by with children by with children by with cats by with me by with visitors to the mg groomed mg held mg petted It It was aggressive behave by	□Short □Medium □Puppy □Adult □ □Small □Medium □Pe/Colour: □S YOU ARE WILLING TO WORK ON tion anxiety □Excitability □ to other dogs □Barking □ twilling to work on any problems more information to decide □KE MY DOG TO: □Y with children □Y with other dogs □Y with visitors to the house □NG groomed □NG held □NG petted □ □ □ SWILL REQUIRE TRAINING □ SWILL REQUIRE TRAINING □ SOG that is already trained □ Sog at circumstances would you return you □ □Too costly □New bat our problem □ S: □ The members of your household met the ever been convicted of neglect or cruel □ SIFIED INFORMATION WILL LEAR ■ TUMBLER RIDGI □ derstand that it is my responsibility of a lifelong animal friend shoulding, lasting relationship. I underst	Short Medium Long Puppy Adult Senior Small Medium Large pe/Colour: SYOU ARE WILLING TO WORK ON tion anxiety Excitability Mild aggression tion anxiety Excitability Mild aggression tion anxiety Excitability Mild aggression tion anxiety Excitability Vocalization tion anxiety Excitability Mild aggression tion anxiety Mild a	Short Medium Long Non-shedding Puppy Adult Senior No preference Small Medium Large No preference Pe/Colour: IS YOU ARE WILLING TO WORK ON Ition anxiety Excitability Mild aggression Obedi Twilling to work on any problems Vocalization Vocalization Vocalization Vocalization Very IMPORTANT Very With children Very With children Very With children Very With children Very With vocalization Very IMPORTANT Very With with the loss Very IMPORTANT Very With with the loss Very IMPORTANT Very With with wisitors to the house Very With vocalization Very With with the loss Very IMPORTANT Very With wisitors to the house Very With wisitors to the house Very With vocalization Very With wisitors to the house Very With vocalization Very With wisitors to the house Very With wisitors to the house Very With vocalization Very With wisitors to the house Very With vocalization Very With wisitors to the house Very With wisitors to the house Very With vocalization Very With wisitors to the house Very With	Short	