

**Cats in Tow Rescue & Sanctuary Inc.**  
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# CAT Adoption Application

Kitten       Cat       CAT/KITTEN'S NAME:

<b>Name:</b>	
<b>Street Address where you live:</b>	<b>City:</b> <b>Zip:</b>
<b>Address where pet will live:</b>	
<b>How long have you lived at this address?</b>	
<b>Cell phone number:</b>	<b>Home:</b>
<b>Email Contact Address:</b>	
<b>Your occupation:</b>	<b>Business phone: (    )</b>
<b>Company:</b>	<b>Supervisor's Name:</b>
<b>Partner's occupation:</b>	<b>Business phone: (    )</b>
<b>Company:</b>	<b>Supervisor's Name:</b>
<b>Whom is the pet(s) for?    Self      Gift      For whom?      Adopter's age</b>	
<b>If you're single: Do you live alone? Yes      No      Do you live with family? Yes      No</b>	
<b>Do you work? Yes      No      What are your hours?</b>	
<b>If you're married: Do you both work? Yes      No      Your hours:      Partner's hours:</b>	
<b>How many children at home?      Ages    ___    ___    ___    ___</b>	
<b>Who will be responsible for the pet? Husband      Wife      Children      Other    _____</b>	
<b>Who will be responsible for the pet when you travel or go on vacation?</b>	
<b>Do you: Own      Rent    House    Apt.    Floor #      Elevator in the building? Yes      No</b>	
<b>If renting, does your lease allow pets? Yes      No      Does it ask cats to be declawed? Yes      No</b>	
<b>Landlord Name &amp; Contact Number: _____</b>	
<b>Are you moving? Yes      No      When?</b>	
<b>Do you have use of a private yard? Yes      No      Is it fenced? Yes      No      Fence height: _____</b>	
<b>Do you have a pet door to your garage or patio? Yes      No</b>	
<b>Where will this pet(s) be kept?</b>	
<b>Indoors      Outdoors      Garage      Other</b>	
<b>Does you or anyone in your household have any allergy to pets? Yes      No</b>	
<b>How is it being treated? _____</b>	
<b>Has anyone in household ever been allergic to any pets? Yes      No</b>	
<b>How was it treated? _____</b>	
<b>Where is the pet now?</b>	
<b>How many other pets are at home? Yes      No    Type: _____    Breed: _____</b>	
<b>Where did you get the pet(s)?</b>	
<b>How long have you had it?</b>	

<p>Do any have a registered microchip? Yes No</p> <p>Would this pet have a registered microchip? Yes No If NO, would it wear an I.D. tag? _____</p>
<p>Have you ever had a pet before? Yes No Breed _____</p> <p>How long did you have the pet? What happened to the pet? _____</p> <p>Have you ever adopted from this group? Yes No</p> <p>Where is the pet now? _____</p>
<p>Name of your current Vet: _____</p> <p>Telephone Number: _____</p> <p>Address: _____</p> <p>How long have you been using this vet? _____</p> <p>Any other vets used? Yes No Vet Name/Number _____</p> <p>What is the highest vet bill you have paid with this vet or any other? _____</p> <p>Do you or have you had pet insurance? Yes No</p> <p>Pet Insurance Company: _____</p> <p>If you do not have it now, will you get it for this pet? Yes No</p>
<p>Do you have a cat scratching post, tower, or boxes? Yes No</p> <p>Do you plan to purchase any or all of these items before bringing your pet home? Yes No</p> <p>How have you handled a cat scratching furniture, climbing drapes, chewing plants, jumping on counters? _____</p>
<p>What type of pet behaviors can you not accept? _____</p> <p>What is your planned solution? _____</p>
<p>Under what circumstances would you not keep your pet? _____</p> <p>Has this happened in the past and what did you do? _____</p>
<p>Cats may live as long as 20 years and they may need extensive medical care in their senior years, how do you plan to handle this issue? _____</p> <p>If your pet would outlive you, do you have a plan for it care? Yes No</p> <p>What is it? _____</p>

I agree that all my answers are true and correct. I plan to be this pet's forever parent and take humane and loving care of it.

Adopter's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Adopter's Signature \_\_\_\_\_ Date: \_\_\_\_\_