

Applicant Information – must be at least 18 years of age.

First Name: _____ Home Email: _____
Last Name; _____ Home Phone _____
Home Address: _____ City: _____ State: _____ Zip Code: _____
Work Name: _____ Work Phone: _____
Work Email: _____ Fax Phone # _____

Co-Applicant Information – please include spouse, significant other, if living with parents/roommates

First Name: _____ Home Email: _____
Last Name; _____ Home Phone _____
Home Address: _____ City: _____ State: _____ Zip Code: _____
Work Name: _____ Work Phone: _____
Work Email: _____ Fax Phone # _____

Household Profile:

What are your living Arrangements? (Proof of ownership, or lease with pet clause may be requested.)

RENT ___ OWN ___

Please check the most appropriate category: house ___ townhouse ___ condo ___
apartment ___ duplex ___ mobile home ___ other ___

If other, please explain:

How long have you lived at this residence?

less than 1 year ___ 1 to 5 years ___ 5 or more years ___

If renting, please provide your landlord's name, address, and phone number:

Are there any community covenants (restrictions, size, type) that prevent you from having a particular pet?

YES ___ NO ___

If yes, please explain:

Are all your pets currently licensed and kept within the legal limits of city/county ordinances?

YES ___ NO ___

Do you have fencing (a totally enclosed, secure yard)?

YES ___ NO ___

If yes, please describe (type of materials and height, amount of space)

If no, how do you plan to exercise the dog?

Other Family:

Do you have any other adults (18 or over), living either full or part time in your home?

YES ___ NO ___

Please list ages and numbers of friends who visit regularly:

Do you have any children (under 18), living either full or part time in your home?

YES ___ NO ___

Please list ages and numbers of friends who visit regularly:

Do you currently own any other pets? YES ___ NO ___

Please list species, age, sex, and temperament details of each pet:

Do any of your pets have special needs, either medical or behavior?

YES ___ NO ___

If yes, please explain in detail:

If you own more than one pet already, why do you want another?

Responsible Pet Ownership:

Are all pets current on vaccinations, heartworm prevention, and flea control?
YES ___ NO ___

Are all pets spayed/neutered to help control the pet overpopulation problem?
YES ___ NO ___

If you have given up a pet in the past, please explain:

If you have ever had a pet die at an early age or in an accident, please explain:

What do you consider the most difficult issue with owning a pet?

References:

May the current owner or rescue agent arrange to visit you in your home to discuss the breed traits and needs of their Chinese Shar-Pei? YES ___ NO ___

If no, please understand a home visit is required for most placements / rescue organizations.

Do you have a current veterinarian? YES ___ NO ___

Please list their name and phone number for a reference check:

Name
Clinic
Phone

Do you have a particular dog in mind??

Dog's Name: from City State

BY CHECKING THE APPROPRIATE BOX BELOW, I ACKNOWLEDGE THAT ALL THE INFORMATION CONTAINED ON THIS FORM IS TRUE AND CORRECT, AND I UNDERSTAND THAT ANY FALSE ATTEMPTS WILL RESULT IN THE IMMEDIATE DELETION OF MY SUBMISSION.

I AGREE ___ I DISAGREE ___

Please sign if returning by mail:

_____ **DATE:** _____