



City of Mont Belvieu Animal Shelter

3831 Perry Ave., Mont Belvieu, TX 77580

Phone: (281)576-2417

Adoption Questionnaire

Thank you for considering adoption!

TO BE CONSIDERED A POTENTIAL ADOPTER, WE ASK THAT YOU:

Welcome to the City of Mont Belvieu Animal Shelter (MBAS)! Adopting a companion animal is a serious commitment and a responsibility that should be taken seriously. The animals available for adoption at MBAS are animals that we have picked up or have been brought to use for many different reasons. We do our best to screen the health of each animal as it is received and during the time it is housed at MBAS. However, there is always a chance that the animal is incubating a disease at the time of admission without showing any clinical signs of disease.

- Be 18 years of age or older.
- Have valid State or U.S. identification.
- Complete this form in its entirety.
- If applicable, have the knowledge and consent of your landlord.
- Be able and willing to spend the time and money necessary to provide vaccinations, medical treatment, training, and proper care for a pet.
- Not be adopting an animal for a surprise gift (parental consent considered)
- Be willing to undergo and consent to a home inspection.
- Not use or plan to use the animal in a cruel or inhumane manner, including fighting.
- Abide by State statutes and local ordinances regarding animals.
- Pay the adoption fees.
- Provide proof of rabies vaccine for the adopted animal, if it has not already been completed, within seven (7) days of adoption if over the age of four (4) months.
- Provide the animal with the care necessary to give it the best chance at a happy and healthy life; this care includes annual exams, vaccinations, dental care, and additional veterinary care in the event of illness or injury.
- Agree the City of Mont Belvieu is not responsible for veterinarian bills/medication/etc. that occur after adoption.
- Agree animals can cause damage and the City of Mont Belvieu is not responsible for damage caused by adopted animals.
- Agree that adopted animals may be returned within one week of their adoption date, should the adoption not work out. Adoption fees are non-refundable. Returns of animals are subject to available space and additional fees may apply.

**INITIAL IF YOU MEET THE ABOVE QUALIFICATIONS AND
AGREE TO THE REQUIREMENTS AND TERMS.
IF SO, COMPLETE THE FOLLOWING:**

Applicant Current Information:

Full Name:
Physical Address Street:
City/Zip:
Mailing Address (if different)
City/Zip:
Cell Phone:
Home Phone:
Work Phone:

I am interested in adopting (Name): _____ Dog Cat

- Why are you interested in adopting (Check all that applies):
 - Companion for Elderly Hunting Family Pet Breeding
 - Barn Cat/Mouser Guard Dog Surprise Companion
 - Companion for Child Emotional Support/Therapy
 - Other: _____
- If adopting as an outdoor dog, do you have a dog house or shelter? Yes No
- If adopting a cat, will you allow them outdoors? Yes No

- Check all activities that may apply to your new pet:

Crated	Walked	Dog Park	Fenced Yard	Chained/Tethered
Toys	Jogging	Day Care	Companions	Other: _____

- What will a typical day be like for your net pet? Explain: _____

- List all cats/dogs currently living at your address:

Name/Age	Breed	Gender	Sterilized	Indoor/Outdoor	Current Status?

- List all cats/dogs that you have had in the past 5 years, not already listed in question 6:

Name/Age	Breed	Gender	Sterilized	Current Status?	If Deceased, Cause?

- Current veterinary clinic used to rabies vaccinate all animals living at your residence:
 Name: _____ Phone: _____

9. Client name(s) listed with the veterinary clinic above:

10. Select your residence type (Check one):
 House Apartment Mobile Home Other: _____

11. Does anyone living with you object to adopting an animal? Yes No

12. Number of residents in household: _____ Roommate: _____

13. Ages of children, if any: _____

14. Is anyone in your household allergic to animals: Yes No

15. If you were to move in the future, what would you do with your adopted animal? _____

16. If you travel out of town, how will your adopted animal be cared for? _____

17. **Most animals at this facility have unknown medical histories.** Are you willing to take your newly adopted pet for an exam with a veterinarian and treat at your own expense?
 Yes No

18. Are you willing to provide exams/prevention/and vaccination annually? Yes No

19. If this animal is heartworm positive, will you treat with a licensed veterinarian at your own expense? Yes No

20. I understand the City of Mont Belvieu is not responsible for veterinarian bills/medication/etc. that occur after this adoption. I understand animals can cause damage and the City of Mont Belvieu is not responsible for damage caused by adopted animals. **I certify that the above information is true and any false information may result in nullifying the application. I understand that Mont Belvieu Animal Shelter reserves the right to refuse adoption to anyone.**

Signature:	_____
Date:	_____

By my signature, I understand and agree to comply with the following:

The sterilization and vaccination for rabies of this animal is required by Texas Health and Safety Code, Chapter 828, and the Code of Ordinance of the City of Mont Belvieu, Chapter 8, Article VI, Section 8-99. Violation of these codes is punishable by a Class C misdemeanor.

MBAS STAFF ONLY:

Approved: Yes No

If denied, reasoning:

If approved, provide the following; if not approved, leave blank:

Animal ID#	
Animal Name	

Required:	
MBAS Staff Signature:	
Date:	