

DOG ADOPTION

APPLICATION FORM

Please complete this form
in full to apply to adopt a
puppy or dog from the
Animal Shelter

Please send this form to
BULLER DISTRICT COUNCIL
PO Box 21
WESTPORT 7866

The information in this form will be used to assist in the adoption of an available dog and one that is suitable for you and your lifestyle.

APPLICANT DETAILS

NAME	Title (Mr, Mrs, Ms Miss):	First:	
	Middle:	Surname:	
ADDRESS			
CONTACT	Home:	Work:	Mobile:
	Fax:	Email:	
PERSONAL	Occupation:	Date of Birth:	

PROPERTY DETAILS

- What best describes your current living situation?
House Flat/Apartment Farm/Lifestyle or rural property
- If renting, do you have permission of your landlord to have a dog on the premises? Yes No
- Name and contact phone number of landlord or agent:

OTHER PETS

- Do you have any other pets? Yes No
If yes, please detail below:

SPECIES	BREED	AGE	MALE/FEMALE

If you currently own 2 dogs you will be required to obtain a permit from council to keep more than 2 dogs on your property

MANAGEMENT

5. Is there anyone home during the day to supervise the dog? Yes No
6. Where will the dog be housed?
7. Where will the dog be kept during the day?
8. Where will the dog be kept at night?
9. How will the dog be exercised?
10. Who will be responsible for exercising the dog?
11. Do you have children?
12. If so, what are the ages of the children?

WELFARE

13. What is the main reason for you getting a dog at this time?
14. Who is your main veterinarian?

OWNERSHIP

13. Have you ever owned a dog previously? Yes No
14. What type of dog are you wanting to adopt? (Size, Breed, Age)

APPLICANTS DECLARATION

Please read the following information and sign at the end of this document to indicate you have understood and accept the terms and conditions from Buller District Council.

1. I agree to an Animal Management Officer visiting my property before adoption to check fencing and proposed living conditions and a follow up visit to check on the success of the adoption.
2. I agree to have the dog de-sexed by a veterinarian at my own expense if required.
3. I accept that Buller District Council is not held responsible for any diseases or illness that may develop after leaving the care of Buller District Council.
4. I will ensure that the dog is loved and cared for and that I will be a responsible dog owner to ensure my dog is not a nuisance to neighbours and to others.
5. Failure to comply with the above will result in the animal being uplifted by an Animal Management Officer and or Animal Welfare Agency at their discretion.

I have answered the above questions honestly and I agree to the above terms and conditions.

Signed:

Dated:

THANK YOU FOR COMPLETING THIS FORM. THIS INFORMATION WILL HELP US TO ADOPT A SUITABLE DOG FOR YOUR CIRCUMSTANCES. OUR AIM IS TO ACHIEVE A HAPPY OUTCOME FOR THE DOG AND FOR YOU. WE RESERVE THE RIGHT TO DECLINE THIS APPLICATION.

