



DOG ADOPTION APPLICATION

Richmond Animal Protection Society ('RAPS')

12071 No. 5 Rd, Richmond, BC V7A 4E9
604-275-2036 – info@rapsbc.com – www.rapsbc.com

Date _____

Dog's Name _____ Dog's Breed _____ Age: _____

Name _____
(hereinafter referred to as the 'Adopter')

Phone # _____ Cell _____

Address _____

City _____ Province _____ Postal Code _____

Home/ Work Phone # _____ Mobile Phone # _____

Email _____

Personal Reference Name _____ Phone # _____

Relationship _____ How long known _____

Please complete the following questionnaire in its entirety. Our main objective is to ensure good compatibility between you, your family, and your new pet. Please return this application to the reception desk staff.

Do you own or rent your residence? Own Rent

If you rent, do you have your landlord's permission to have a dog? Yes No

Landlord's name and phone #: _____

What type of home do you live in? House Apartment Condo Trailer Townhouse

Other: _____

How long have you resided at your current address? _____



Is this going to be your first dog?

Yes No

If no, what kind of dogs have you previously owned? _____

Were they:

Indoor Outdoor Indoor and Outdoor

If this is not your first dog, what happened to your previous dog? _____

List plans for this dog:

Companion Outdoor Guard Indoor Protection Hunting Obedience Agility

Other: _____

Do you have a regular veterinarian?

Yes No

If yes, please provide name and phone #: _____

Are you 25 years of age or over?

Yes No

Who will be the primary caregiver of the dog? _____

Are all family members in agreement of adopting a dog?

Yes No

Are there any children residing in your household?

Yes No

If yes, how many? _____ What ages? _____

Does any family member suffer from allergies?

Yes No

Do you currently own any other animals (including livestock)?

Yes No

If yes, please list: _____

Are they spayed or neutered?

Yes No

If you do have other pets, how do you feel they will adjust to a new dog in the house?

Do you have a fully-fenced yard?

Yes No

If yes, what is the height and type of fence? _____

If no, how will you handle the dog's exercise and toilet needs? _____



Do you have a separate kennel run?

Yes No

If yes, list height and size? _____

If yes, is there a dog house in the run?

Yes No

If yes, how often will you use this run? _____

On average, how many hours a day will the dog be left alone? _____

Where will the dog spend the day when you are NOT home? (check all that apply)

Loose indoors Loose outdoors Tied up outdoors Kennel Run Fenced Yard Basement
 Garage _____

Where will the dog spend the day when you ARE home? (check all that apply)

Loose indoors Loose outdoors Tied up outdoors Kennel Run Fenced Yard Basement
 Garage _____

Where will the dog sleep at night? (check all that apply)

Loose indoors Loose outdoors Tied up outdoors Kennel Run Fenced Yard Basement
 Garage _____

If you answered BASEMENT to any of the above questions, please answer the following:

Is your basement finished and used by the family?

Yes No

Will the dog be alone in the basement?

Yes No

Will the dog be allowed to go upstairs when the family is upstairs?

Yes No

How do you plan to exercise your dog? _____

How much time per day can you commit to exercise your dog? If yes, please list: _____

What will you feed this dog?

Dry food Wet food Raw food Other: _____

Have you considered the financial responsibilities of owning a dog?

Yes No

Do you feel you can commit to a dog for the next 10 to 20 years?

Yes No



If you were to go on vacation, where would the dog stay? _____

If you were to move in the future, what would happen to the dog? _____

Are you willing to take this dog to positive-method obedience classes? Yes No

Are you able to provide proper medical care for your dog as required? Yes No

Are you in agreement with the rule that if you can no longer keep the dog, you are required to return it to RAPS? Yes No

What would be the number one reason for you to return the dog? _____

Training Questions

What is your opinion of using a crate for training purposes? _____

Your dog refuses to obey a command such as "get off the couch." How would you handle this? _____

If you returned home to find that your dog has chewed your furniture or urinated/defecated on the floor, what would you do?

ONLY APPLICANTS CHOSEN FOR ADOPTION WILL BE CONTACTED

Animal Control Services are concerned for the well being of all shelter dogs. Would you be willing to allow one of our staff members to do a scheduled home visit prior to, and/or after the adoption process? Yes No

If no, explain

All the information I have provided above is true and correct.

Applicant's signature _____ Date _____ Staff Initials _____

The Richmond Animal Protection Society reserves the right to refuse any applicant.