

## **Mobile County Animal Shelter**

## Adoption Application

(ALL APPLICANTS MUST BE 19 YEARS OLD AND UP)

Please Print Clearly					
Applicant Name:	Date c	of Birth:	Driver's	Lic. #	
Current Address:					
City:		State:	Z	ip Code:	
Phone # : ()	Work #: ()	,	Alternate #: (_	)	
Email Address:					
Do you: 🗆 Rent 🗀 Own					
If you are currently renting ple	ase attach a copy o	of your Pet Pol	licy:		
Landlord Name:			Phone #:	Phone #: ()	
About the Household					
Number of Adults (in household	d): Numbe	r of Children (	in household)	:	
Ages of Children:					
Do you have any other pets? Ple	ease describe :				
Are your pets current on their R	abies Vaccination?	Yes	□No		
Can you provide proof of this va	ccination?	□Yes	□No		
Have your current pets been sp	ayed or neutered?	□Yes	□No		
What are your reasons for adop	ting this animal? (Ch	eck all that ap	ply)		
☐ CHILDREN'S PET		OR SELF/FAMI	LY 🗆 H	UNTING DOG	
$\square$ WATCH/GUARD DOG	□GIFT				
What drew you to this animal th	at you are interested	I in adopting?			
Have you ever owned this breed	I before? ☐ <b>Yes</b>	□No			
When outside, how do you inter	nd to keep the dog or	your property	y? (Check all t	hat apply)	
	ASH FENCED	PEN 🗆 TII	E-OUT □FI	REE ROAM	



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Have your previously adopte	d from MCAS?   Y	es 🗌 No				
Have you or anyone in your household been issued a citation or had an animal impounded by the Mobile County Animal Control Department? <b>Yes No</b> If yes, under what name(s)?						
Reason for Citation:						
Are you able to provide the n the county ordinance? 🔲 <b>Y</b> e	-		rdance with the state statute and			
l authorize a pet adoption ph	oto to be taken and p	osted on MCAS socia	l media: 🗆 <b>Yes</b> 🗆 <b>No</b>			
THE BEST OF MY KNOW ANIMAL CONTROL MAKES ANIMALS. I FURTHER AG DISEASE THAT MAY BE TRA	LEDGE AND BELIEF. I NO WARRANTY IN RE CKNOWLEDGE THAT A NSMITTED TO OTHER	FURTHER ACKNOWL EGARD TO THE HEALT ADOPTED ANIMALS M R ANIMALS I MAY OWN	ARE ACCURATE AND TRUE TO EDGE THAT MOBILE COUNTY H OR CONDITION OF ADOPTED AY HARBOR A CONTAGIOUS N. I THEREBY HOLD HARMLESS, WITH THIS ADOPTION.			
Print Name	Signature		Date			
	For Off	ice Use Only				
	Approve	d Rejected				
Comments:						
Reason for Rejection:						
Print Name	Signature		Date Date			
Animal ID #:	_ Intake #:	Receipt #:	Time:			