

# BRIDGEPORT ANIMAL CONTROL CAT ADOPTION APPLICATION

Cat Impound: \_\_\_\_\_

OFFICE USE ONLY

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

APPROVED: \_\_\_\_\_

Address: \_\_\_\_\_

DENIED: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Address: \_\_\_\_\_

Work Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Do you Rent or Own? (Please Circle One)

How long have you lived at this address? \_\_\_\_\_ Will your landlord permit pets? \_\_\_\_\_

*Please remember that you MUST bring a NOTARIZED Letter from your landlord stating that you can have pets.  
If you own, you must bring proof of home ownership in the form of a property tax bill or a mortgage statement, etc.*

## Please Circle One of the following:

Do you have children? Yes or No If Yes, what are their ages? \_\_\_\_\_

Did you have pets in the past? Yes or No  
If Yes, what kind and how many? \_\_\_\_\_

If your pets are no longer with you, why? \_\_\_\_\_

Do you have pets now? Yes or No  
If Yes, what kind and how many? \_\_\_\_\_

Are your current pets sterilized? Yes or No Are they up to date with shots? Yes or No

Do you plan to spay or neuter your cat? Yes or No If Not, why? \_\_\_\_\_

Do you plan to declaw your cat? Yes or No If Yes, why? \_\_\_\_\_

Do you plan to let your cat outside? Yes or No If Yes, why? \_\_\_\_\_

If you are currently a dog owner, is your dog licensed? Yes or No or N/A

Who is your veterinarian? \_\_\_\_\_ Phone Number: \_\_\_\_\_

Will you take your cat to the veterinarian for complete medical treatment if necessary? Yes or No

Cats can live for over 15 years. Can you commit to care for a cat for the entirety of its life? Yes or No

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Where will your cat be kept during the day? \_\_\_\_\_ At Night? \_\_\_\_\_

What accommodations can you arrange for the cat when going on vacation? \_\_\_\_\_

How many hours a day will the cat be left alone? \_\_\_\_\_

### Please initial each box to acknowledge that you understand and adhere to the following statements:

\_\_\_\_\_: I am 18 years of age or older.

\_\_\_\_\_: I have knowledge and consent of all adults in the household.

\_\_\_\_\_: I have the Landlord's consent to bring an animal onto the property.

\_\_\_\_\_: I understand the following statements regarding the Bridgeport Animal Control adoption application:

- ❖ This form is to ensure that the animal and the potential adopters are compatible. Incomplete forms or false information may result in the rejection of this request.
- ❖ Per State Statute 22-332, the Animal Control Officer has the authority to adopt an animal under his or her own discretion.
- ❖ Filling out this application doesn't automatically approve you for the animal or put a "Hold" on the animal.
- ❖ I authorize the investigation of all information and statements on this form and understand that misrepresentation or omission of facts is cause for denial of an adoption.
- ❖ I certify that all the information in this application is true and correct to the best of my knowledge.

\_\_\_\_\_: I understand that Bridgeport Animal Control has the right to deny my application for any reason.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

If you have any questions, please contact us!

Address: 236 Evergreen St. Bridgeport CT, 06606

Facebook: Bridgeport Connecticut Animal Control

Phone: 203.576.7727

Email: [animal.shelter@bridgeportct.gov](mailto:animal.shelter@bridgeportct.gov)