

BRIDGEPORT ANIMAL CONTROL EXOTIC ANIMAL ADOPTION APPLICATION

Animal Impound#/Name: _____

OFFICE USE ONLY

Circle One: *Reptile* *Rabbit/Guinea Pig* *Bird* *Farmyard* *Other:* _____

APPROVED: _____

Applicant Name: _____ Date of Birth: _____

DENIED: _____

Address: _____

City, State, Zip: _____

Home Number: _____ Cell Number: _____

Home Address: _____ Email Address: _____

Place of Employment: _____ Employer Phone: _____

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.*

YOUR APPLICATION CANNOT BE APPROVED UNTIL THIS STEP IS COMPLETE!

Please Circle One of the following:

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

Who will be the primary caregiver for this pet? _____

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 (if applicable)? Yes No N/A Are they up to date with shots? Yes No N/A

Who is your veterinarian? _____ Phone Number: _____

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

Can you commit to care for this species for the entirety of its life (15-30+ years for some species)? Yes or No

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Do you have experience owning/caring for the species of animals you are applying to adopt? Yes or No

If yes, please explain: _____

What type of enclosure have you prepared for this species? (You will be asked to provide proof of suitable enclosure)

What accommodations can you arrange for your pet when going on vacation? _____

If YOU are ill, injured, or otherwise no longer able to care for your pet, what plan is in place for your pet's care?

Please provide a reference:

Name: _____ Relationship: _____ Phone: _____

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

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Phone: 203.576.7727

Email: animal.shelter@bridgeportct.gov