



Palmer Township Police Department - Canine Adoption Application

(Please Print) **Name:** _____
Last, First Middle

Address: _____
Street Address City/Town/Borough State Zip Code

Home Phone: _____ - _____ - _____ **Cell Phone:** _____ - _____ - _____

DOB: _____ **E-Mail:** _____ @ _____ .

List all individuals residing in the household, including their Relationship: (spouse, child, other please state)
(If more than 5, include information on additional extra pages/ or reverse side at end of application)

Name: _____	DOB: _____	Age: _____	Relationship: _____
Name: _____	DOB: _____	Age: _____	Relationship: _____
Name: _____	DOB: _____	Age: _____	Relationship: _____
Name: _____	DOB: _____	Age: _____	Relationship: _____
Name: _____	DOB: _____	Age: _____	Relationship: _____

Do you currently have a dog(s)? _____ **If so, what breed(s) and for how long?** _____

Do you currently have any other pets? _____ **If so, please list all current pets:** _____

Have you owned any dogs, cats + any other pets previously? Please list what ultimately happened to them.
(If more than 10, include information on additional extra pages/ or reverse side at end of application)

1- _____	6- _____
2- _____	7- _____
3- _____	8- _____
4- _____	9- _____
5- _____	10- _____

REFERENCE #2 :

Name: _____
LAST, FIRST MIDDLE

Street Address: _____
Street Address City/Twp/Borough State Zip Code

Home Phone: _____ - _____ - _____ Cell Phone: _____ - _____ - _____

E-mail: _____ @ _____ . _____

REFERENCE #3 :

Name: _____
LAST, FIRST MIDDLE

Street Address: _____
Street Address City/Twp/Borough State Zip Code

Home Phone: _____ - _____ - _____ Cell Phone: _____ - _____ - _____

E-mail: _____ @ _____ . _____

Are you willing to accept this dog in an "as is" condition as the Palmer Township Police Department and Palmer Township do not warranty nor guarantee the condition of health, genetic predisposition, temperament and/or longevity of the dog? _____

A representative of the police department may want to visit your home to verify the environment in which this dog will reside. Do you consent to this visit for both internal and external inspection: _____

If not already done, do you agree to have the dog neutered or spayed within thirty days of adoption and show proof of compliance? _____

I agree that the Palmer Township Police Department may run Criminal History Checks on all adults within the household.

I understand that the Palmer Township Police Department and Palmer Township has the right to deny any adoption candidate for any reason during the process of evaluation.

I represent that all of the answers and statements above made to the Palmer Township Police Department and Palmer Township for the purposes of the adoption of a dog are truthful to the best of my knowledge.

By signing this application I agree to release and hold harmless Palmer Township, Palmer Township Police, Employees, Volunteers, Committee Members, consultants, care givers and all others of all liability and responsibility of this animal.

Signature _____

Print Name _____

Date _____ 20 _____

USE ONLY IF ADDITIONAL SPACE IS NEEDED TO COMPLETE FIRST PAGE

CONTINUED FROM FIRST PAGE ONLY IF ADDED SPACE IS NEEDED :

List all individuals residing in the household, including their Relationship: (spouse, child, other please state)

Name: _____ DOB: _____ Age: _____ Relationship: _____ .

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Name: _____ DOB: _____ Age: _____ Relationship: _____ .

Name: _____ DOB: _____ Age: _____ Relationship: _____ .

Name: _____ DOB: _____ Age: _____ Relationship: _____ .

CONTINUE FROM FIRST PAGE ONLY IF ADDED SPACE IS NEEDED FROM FIRST PAGE:

Have you owned any dogs, cats + any other pets previously? Please list what ultimately happened to them.
(if more than 10, include info on additional on reverse side of this page)

1- _____ 6- _____

2- _____ 7- _____

3- _____ 8- _____

4- _____ 9- _____

5- _____ 10- _____