

PALM BEACH COUNTY ANIMAL CARE & CONTROL DIVISION

7100 Belvedere Road, West Palm Beach, FL 33411



Adoption Application

Thank you for opting to adopt!

Step One: Download and fill out the adoption application

Step Two: Email completed application to: ACCCustomerService@pbcgov.org
Reference the animal ID# of the dog or cat you are interested in the email

Step Three: **Once we have received and approved your application, we will contact you.**
Submittal of an application DOES NOT GUARANTEE approval or availability of any pet



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7100 Belvedere Road, West Palm Beach, FL 33411

561-233-1200 • Pet Adoptions: 561-233-1272

(West County Shelter: 3615 Hwy 715, Pahokee FL, 33476, 561-924-5656)

☐ Refund

☐ Exchange

Amt: \$ _____

Date: _____

ADOPTION APPLICATION

(Please print in Ink Only)

☐ **Healthy Home Program**

Date: _____

There is an adoption fee for each animal adopted. **FLORIDA STATE STATUTE 823.15 REQUIRES THAT ALL DOGS/CATS ADOPTED FROM AN ANIMAL SHELTER MUST BE SPAYED OR NEUTERED.**

Name _____ Phone () _____
Last First M.I.

Street Address _____ Alt. Phone () _____

City _____ ZIP Code _____

Email _____

- ☐ How many dogs/cats do you currently own? Dog _____ Tag No. _____ Cat _____ Tag No. _____
Dog _____ Tag No. _____ Cat _____ Tag No. _____
Dog _____ Tag No. _____ Cat _____ Tag No. _____
- ☐ Have you or any member of your household ever been charged and convicted of Animal Cruelty? ☐ Yes ☐ No
- ☐ New pets require up to 6 weeks to adjust in a new home. Are you able to allow for this adjustment period? ☐ Yes ☐ No
- ☐ This pet may not be housebroken, may chew, eat plants and/or scratch furniture. Are you able to provide remedial training, if needed? ☐ Yes ☐ No
- ☐ Would you object to a follow-up visit or phone call to check on the progress of your new pet? ☐ Yes ☐ No
- ☐ Are you going to house the dog outside? ☐ Yes ☐ No
If yes, is your yard completely fenced and are you providing the minimum required outdoor shelter? ☐ Yes ☐ No
- ☐ By acceptance of the sample bag of pet food, I authorize ACC to give my name, address, and email information to Hill's Science Diet for statistical research.
- ☐ Driver License No. _____ State of Issue _____

TO BE COMPLETED BY ADOPTER

I HAVE READ AND AGREE TO ABIDE BY ALL OF THE FOLLOWING PROVISIONS ON THE REVERSE SIDE OF THIS AGREEMENT.

Applicant's Signature

Date

TO BE COMPLETED BY ANIMAL CARE & CONTROL PERSONNEL

1st Animal I.D. _____ Breed _____ Sex _____ Cage _____ PRD _____ STC _____

2nd Animal I.D. _____ Breed _____ Sex _____ Cage _____ PRD _____ STC _____

Date of Adoption _____ Adoption Receipt No. _____ Amount \$ _____

Rabies License Tag No. _____ Rabies Vaccination Date _____

ACC Approval _____

ADOPTION AGREEMENT

I wish to adopt an animal from the Palm Beach County Animal Care and Control Division and I certify that the information I have provided is true and accurate. I also understand the following:

1. ALL adopted dogs and cats will be spayed/neutered by Animal Care and Control prior to being released to the adopter.
2. The medical processing procedure includes a general physical exam, necessary medical tests, preliminary worming, rabies and other necessary vaccines, a spay or neuter operation, permanent microchip I.D. and a Palm Beach County rabies license tag. The Animal Care and Control Division's veterinarian will make a substantial effort to see that all adopted pets are in good health, however, it is possible that an undetectable illness may be incubating at the time of adoption. Potential owners who wish to adopt pets with known physical defects or ailments must make prior arrangements with their private veterinarians to initiate immediate medical follow-up for the adopted pet. New pet owners should contact and follow the advice of their private veterinarian as soon as possible.
3. I agree to read all enclosed documents including, but not limited to, documents describing upper respiratory illnesses, parvo virus, and cat distemper.
4. Animal Care and Control provides no guarantee of any pet's age, behavior, breed, or general disposition.
5. I agree to provide timely, appropriate medical care and a humane existence for any pet that I adopt from Animal Care and Control.
6. I will notify Animal Care and Control immediately upon transfer of ownership (Telephone: 561-233-1272).
7. I recognize that adopting a shelter pet is a noble and unselfish act. I also understand that pet medical history and behavior are hereby unknown for my shelter pet. I further understand that treatment and prognosis for my adopted pet are my financial responsibility and are dependent upon my pursuance of advanced medical behavior and therapy. I hereby release Palm Beach County Animal Care and Control from all responsibility and liability.
8. Failure to abide by this agreement may result in civil and/or criminal proceedings against the adopter and/or impoundment of the adopted pet. When civil action becomes necessary, the adopter agrees to be liable for attorney's fees should the County prevail. I understand that should I violate this agreement, I will not be permitted to adopt any pets from Animal Care and Control.