

Paid: \_\_\_\_\_



1102 E. Main Ave.  
Puyallup, WA 98372  
253-845-8866  
Tax ID#27-4119996

## Application Information

Name of pet: \_\_\_\_\_ Name of Adopter: \_\_\_\_\_

\_\_\_\_\_ Application submitted on \_\_\_\_\_

**APPROVED** \_\_\_\_\_

\_\_\_\_\_ Vet reference called

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Landlord called/mortgage confirmed

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Driver's license

\_\_\_\_\_ Proof of address

\_\_\_\_\_ Date to go home \_\_\_\_\_

Other Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DENIED** \_\_\_\_\_

Reason for denial: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_





Thank you for your interest in one of the lovable companions at Sunny Sky's Animal Rescue. We understand this is a big decision for you. Pet ownership is a serious, long-term commitment!

Our adoption process is designed to ensure the pet you wish to adopt will fit in well with your family. We realize it may appear lengthy; it is our goal to be thorough to make sure adopters are knowledgeable, capable, and willing to accept the moral, physical, and financial responsibilities of owning a pet. We also want to make sure your home will offer the best environment for the life of the animal. The minimum age to adopt a pet is 21.

Please take your time to read all documents in their entirety. We will review each of your responses to determine whether your family is adequately prepared to assume the rewarding responsibility of adopting a new family member. Please be patient with us while we process your application! We care a great deal about each and every animal under our care, and want to do the best job we possibly can to find them the perfect forever home.

Let's get started...

Your name: \_\_\_\_\_ Today's date \_\_\_\_\_

Name of the cat you wish to adopt: \_\_\_\_\_

Are there other cats you are interested in? \_\_\_\_\_  
\_\_\_\_\_

How did you hear about us? \_\_\_\_\_

.....For Office Use Only.....

Microchip # \_\_\_\_\_



## IMPORTANT NOTE: THIS IS ONLY AN APPLICATION!!

**Filling out this application does not guarantee you will be approved to adopt a pet.**

- We accept applications via email, fax and in person. At the time your application is submitted, there may be other applications for the same pet, which we may not be aware of.

Initial

- **If multiple applications are received for the same pet, we will review each application and ultimately base our decision on the best fit for the pet.**

- We will notify you via phone or email if we have further questions or have reached a decision about your application.
- In some situations a 'meet and greet' introduction may be required before your application is processed.

Initial

- **We are a private shelter and reserve the right to deny an application for any animal for any reason.**

Please understand that it may take several days to process the application. We do our best to process applications as quickly as possible and will notify you as soon as a decision is made.

**Incomplete applications will delay the review process.**

We sincerely appreciate your time and understanding.

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Signed Name)

\_\_\_\_\_  
(Date)

## **ADOPTION PROCESS**

### **STEP 1: Complete the adoption packet.**

Please complete the following:

1. Shelter Policies document
2. Adoption Application
3. Veterinary Reference document
4. Pet Adoption Agreement

### **STEP 2: Provide required documentation.**

Provide the following for us to make a copy:

1. Identification - Driver's license or state ID card
2. Proof of residency
  - Utility bill - **AND** -
  - Homeowners: Recent mortgage statement
  - Renters: Lease agreement or pet addendum with property address

### **STEP 3: Pay the adoption fee.**

The adoption fees are as follows:

- |                                   |  |
|-----------------------------------|--|
| • Senior dogs (8 years and older) | \$159 to \$189 (some exceptions may apply)       |
| • Adult dogs (6 months and older) | \$239  |
| • Puppies (up to 6 months)        | \$360 to \$500 + refundable \$50 for spay/neuter |
| • Adult cats and kittens          | \$109 + refundable \$50 for spay/neuter          |

We accept cash and credit cards as method of payment. We do not accept personal checks.

### **STEP 4: Schedule a pick up date and time.**

Animals usually go home within a few days of the application process (once the application is approved). Some animals may go home on the day the application is approved, if they are spayed/neutered, up to date on vaccines, micro-chipped, and approved to leave by Sunny Sky's.

Pets adopted from our shelter on Saturdays typically do not go home until the following week.

Boarding fees may apply if you cannot pick up the animal when scheduled.

If the adult animal you adopted has not yet been spayed or neutered, the surgery must be scheduled and completed before the pet can be picked up. Surgeries can often be scheduled within several days, with pick up the afternoon of the surgery or the following morning.

Puppies and kittens may not be taken from the shelter until they are at least 8 weeks of age. A spay or neuter date may need to be scheduled (if the pet does not weigh enough for surgery), as well as a pick up date and time. A Spay/Neuter Agreement must be completed and a \$50 refundable deposit paid prior to an unaltered pet leaving the shelter.

**SHELTER POLICIES – Important Information for You to Know Before Adopting**

Sunny Sky’s Animal Rescue is a non-profit, no-kill shelter. We rescue forgotten, abused, and neglected animals and provide a caring and safe refuge for them until a forever home can be found. Until that happens, we ensure each animal receives the physical and medical attention they need and deserve.

Most of our animals are transferred from high-kill shelters, however we do accept owner surrenders from our community when space is available. We do not receive state funding, and thus rely heavily on adoption fees and financial donations to purchase medications, food, supplies, etc.

**The adoption fee includes:** spay or neuter procedure, initial vaccinations, microchip\*, preventative flea and tick treatment, and de-wormer.

\*To ensure that our animals never end up in a kill-shelter, Sunny Sky’s will be listed with the microchip company for the life of the animal. If your adopted pet is recovered by us, we will make every effort to contact you using the information provided on this application. If your information changes (address, phone) please make sure to notify the shelter with the updates.

**Adoption fees are NON-REFUNDABLE.** If for any reason you do not wish to keep the pet you adopted, you **MUST** bring it back to Sunny Sky’s Animal Rescue – and no other shelter. This is not negotiable! Animals adopted from our shelter are not to be given as gifts, cannot be sold, traded, or given away to another person or facility. We are a no-kill shelter and cannot ensure if the animal is given to someone else, it will not be euthanized.

Per this contract, **you will be fined \$500 if the pet you adopt from our shelter is sold, traded, or given away.** This is in conjunction with any and all remedies available to us as outlined in the adoption packet.

**We do not keep hard copies of your pet’s medical records on site.** You will receive a copy of your pet’s medical records at the time of adoption. Due to the volume of animals we adopt at the shelter and limited storage space, we store the records of adopted animals off-site. This means it may take two full weeks to retrieve old records if you or your veterinarian needs a copy. We recommend you give a copy of your new pet’s records to your veterinarian to avoid delay.

If you would like an additional copy of your pet’s medical records, please send a written request via email to [sunnyskysanimalrescue@gmail.com](mailto:sunnyskysanimalrescue@gmail.com). **There will be a charge of \$25 for us to retrieve and send the records.**

By signing below, I acknowledge I have read, understand, and agree to the Sunny Sky’s Animal Rescue policies described above.

_____	_____	_____
(Printed Name)	(Signed Name)	(Date)
_____	_____	_____
(Printed Name co-applicant)	(Signed Name co-applicant)	(Date)

Cat Name: \_\_\_\_\_ ID# \_\_\_\_\_

## ADOPTION APPLICATION

Instructions: **Please answer every question on this application. If a question is not applicable, write "N/A".**  
**Applicant and co-applicant must complete and sign application.**

Date: _____	
Applicant Name: _____	Co-Applicant Name: _____
Address: _____	
City: _____	State _____ Zip: _____
Applicant Employer: _____	Co-Applicant Employer: _____
Best Contact Phone Number: (     ) _____	Type: <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work
Alternate Phone Number: (     ) _____	Type: <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work
Email Address: _____	
How many adults reside in your home including yourself? Men _____ Women _____	
Do they all know you plan to adopt a new pet? <input type="checkbox"/> Yes <input type="checkbox"/> No	
How many children reside in your home? _____	
How old are your children? _____ Have they been around cats before? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do other children visit your home? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you plan on expanding your family in the next two years? <input type="checkbox"/> Yes <input type="checkbox"/> No	
What type of residence do you occupy? <input type="checkbox"/> House <input type="checkbox"/> Apartment/Condo <input type="checkbox"/> Other (e.g., houseboat)	
Do you own your own home? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If you <b>rent</b> your home ( <b><i>we will contact your landlord as part of the review process:</i></b> )	
<ul style="list-style-type: none"><li>• Do you have permission from your landlord to add a pet to your household? <input type="checkbox"/> Yes <input type="checkbox"/> No</li><li>• Is there a weight limit on pets? <input type="checkbox"/> Yes <input type="checkbox"/> No</li><li>• May we contact your landlord? <input type="checkbox"/> Yes <input type="checkbox"/> No</li><li>• What is your landlord's name and phone number?</li></ul>	
Name: _____ Phone Number (     ) _____	
Do you currently have a cat? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is your cat declawed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Where does your cat spend its time during the day? _____	
_____	
Where does your cat spend its time at night? _____	
_____	
Do you have a pet door? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Cat Name: \_\_\_\_\_ ID# \_\_\_\_\_

**New Cat:**

Will your cat live:  Indoor  Outdoor  Indoor/Outdoor

Are you considering declawing this cat?  Yes  No If yes, why? \_\_\_\_\_

On a regular basis, how long will this cat be alone? \_\_\_\_\_ hours Please explain:

Where will the cat be kept during this time?  In the house  Outside  Free Access In and Out (ex. dog door)

Please describe, if necessary: \_\_\_\_\_

Where will this new cat be during the day? \_\_\_\_\_

Where will this new cat be at night? \_\_\_\_\_

Please describe, if necessary: \_\_\_\_\_

Where will you keep this new cat when you are on vacation? \_\_\_\_\_

Why are you interested in adopting a new cat? \_\_\_\_\_

What qualities you are looking for in a new cat? \_\_\_\_\_

What makes this particular cat perfect for you/your family? \_\_\_\_\_

Are you familiar with the characteristics and temperament of this breed?  Yes  No

What concerns, if any, do you have about adopting this cat? \_\_\_\_\_

How much do you think it will cost to care for this new cat each month? \$ \_\_\_\_\_

How often will you take your new cat to a veterinarian? \_\_\_\_\_

Do you presently own any pets?  Yes  No

If "yes", please list the type(s) (e.g., dog), breed(s), and indicate whether the pet(s) are altered (spayed/neutered).

Breed: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_ Altered  Yes  No

Breed: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_ Altered  Yes  No

Breed: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_ Altered  Yes  No

Breed: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_ Altered  Yes  No



Cat Name: \_\_\_\_\_ ID# \_\_\_\_\_

Have you owned pets in the past (while you were an adult)?  Yes  No

If "yes", please indicate the type of pets (e.g., cat) and why you no longer care for them.

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Have you ever owned a pet with behavioral problems?  Yes  No

If "yes", please describe the issue(s) and how you dealt with it. \_\_\_\_\_

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Have you ever bred a pet?  Yes  No

If "yes", what type of animal did you breed? \_\_\_\_\_

Why did you breed the animal?  Fun  Show  Profit  Accidental

Have you ever surrendered a pet to a rescue agency?  Yes  No

If "yes", please describe the situation.

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What training or techniques will you use in the following situations?

- Doesn't get along with children or other pets? \_\_\_\_\_  
\_\_\_\_\_
- Bites? \_\_\_\_\_  
\_\_\_\_\_
- Develops expensive health problems? \_\_\_\_\_  
\_\_\_\_\_
- Urinates/defecates outside litterbox?  
\_\_\_\_\_  
\_\_\_\_\_
- Sheds? \_\_\_\_\_  
\_\_\_\_\_
- Develops separation anxiety? \_\_\_\_\_  
\_\_\_\_\_
- Scratches furniture? \_\_\_\_\_  
\_\_\_\_\_

Are you in the military?  Yes  No If yes, what is your plan for your pet if relocated or deployed? \_\_\_\_\_

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Cat Name: \_\_\_\_\_ ID# \_\_\_\_\_

**We cannot always predict life changes like a move, divorce, marriage, birth or death, but we can plan for our pets.**

What will you do if your family moves (e.g., military PCS, divorce/separation, assisted living)? \_\_\_\_\_

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Does anyone in your household have an allergy to cats?  Yes  No If "no", what will you do if you or your family member develops allergies to the new pet? \_\_\_\_\_

Under what conditions would you not keep the new cat? \_\_\_\_\_

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Please include any additional comments, questions, or information you would like Sunny Sky's Animal Rescue to know about below.

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By signing below, I pledge that the information I have provided is true to the best of my knowledge. In addition, I understand Sunny Sky's Animal Rescue has the right to refuse adoption to anyone for any reason.

\_\_\_\_\_  
(Printed Name) (Signed Name) (Date)

\_\_\_\_\_  
(Printed Name) (Signed Name) (Date)

Cat Name: \_\_\_\_\_ ID# \_\_\_\_\_

**VETERINARY and PERSONAL REFERENCE**

**Please make sure veterinary information is accurate.**

Sunny Sky’s Animal Rescue requires a veterinary reference for those who currently have or formerly owned a pet. This helps us determine whether potential adopters have a reliable history of adequate pet care, and will be more likely to provide appropriate care for a new rescue animal. We also require a personal reference for a friend, family member not living in your house hold, etc.

We will contact the veterinary practice you provide below to find out if your pet(s) is/was up to date on required vaccinations and altered (spayed/neutered).

**Please provide all veterinary contact information for the last 10 years.**

Name of veterinary practice and/or veterinarian: \_\_\_\_\_

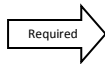
Location of veterinary practice: City \_\_\_\_\_ State \_\_\_\_\_

Phone number of veterinary practice: (\_\_\_\_\_) \_\_\_\_\_

Name(s) and type(s) (e.g., dog) of the pet(s) you own/owned who were treated by the veterinary practice.

Name _____	Type _____	Deceased <input type="checkbox"/> Yes <input type="checkbox"/> No
Name _____	Type _____	Deceased <input type="checkbox"/> Yes <input type="checkbox"/> No
Name _____	Type _____	Deceased <input type="checkbox"/> Yes <input type="checkbox"/> No
Name _____	Type _____	Deceased <input type="checkbox"/> Yes <input type="checkbox"/> No

If the pet was registered under a different owner, please list the name here: \_\_\_\_\_



**Name and phone number of personal reference:**

Name: \_\_\_\_\_ Phone Number (\_\_\_\_\_) \_\_\_\_\_

By signing below, I give Sunny Sky’s Animal Rescue permission to request and obtain information about my current and/or former pets from the above listed veterinary practice and to contact my personal references.

_____	_____	_____
(Printed Name)	(Signed Name)	(Date)

_____	_____	_____
(Printed Name co-applicant)	(Signed Name Co-applicant)	(Date)

**For Sunny Sky’s Animal Rescue Internal Use Only**

Office contact name: \_\_\_\_\_ Date verified: \_\_\_\_\_ SSAR initials: \_\_\_\_\_

Pet name: \_\_\_\_\_ Altered  Yes  No UTD on vaccines  Yes  No

Pet name: \_\_\_\_\_ Altered  Yes  No UTD on vaccines  Yes  No

Additional notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_