

**Sangamon County Department of Public Health  
Animal Control & Adoption Center  
2100 Shale Rd., Springfield, IL 62703  
217-535-3065**

**ADOPTION APPLICATION**

Sangamon County does not adopt animals as gifts. All individuals residing in a household must be alerted to the fact the animal is being adopted prior to finalization of the adoption. Answer each question completely and return the form by:

- (1) In-person (Monday - Friday 10:30 AM - 4:30 PM, Saturday 10:30 AM - 12:30 PM)  
(2) Email: [scacapplications@sangamonil.gov](mailto:scacapplications@sangamonil.gov).  
(3) Fax: 217-535-3067

**PLEASE PRINT**

Name \_\_\_\_\_  
Last First M.I.  
Address \_\_\_\_\_ Lot# or Apt# \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (home) \_\_\_\_\_ (work/other) \_\_\_\_\_

For office use only
Cage _____
Occurrence # _____
Date/Time _____

Age (must be 18) \_\_\_\_\_ **Photo identification required.**

1. Do you currently ☐ rent ☐ own ☐ live with relatives or friends

**Note: If renting or living with friends/relatives, Sangamon County Animal Control reserves the right to verify that animals are allowed in the home. Refusal to provide information to confirm this will constitute denial of your adoption.**

Landlord/homeowner: \_\_\_\_\_ Phone: \_\_\_\_\_

*Additional information for parts 2-5 may be provided on the back of this application.*

2. Do you currently have other pets? ☐ Yes ☐ No If yes, please provide the following for each pet:

Breed	Name	Age	Spayed or neutered	Male or Female	Vaccinations Current?	Registered with Sangamon County

Please state the veterinarian you currently use or plan to use in the future:

\_\_\_\_\_  
Name of Veterinarian Name of Veterinary Clinic Phone Number

3. If you have other pets, have they ever been impounded at our facility for violation of an Animal Control Ordinance? ☐ Yes ☐ No If yes, please explain:

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4. Have you ever been issued a citation for violation of an Animal Control Ordinance? ☐ Yes ☐ No  
If yes, please explain: \_\_\_\_\_

5. Have you ever violated any local, state or federal law or regulation involving the humane treatment of animals? ☐ Yes ☐ No If yes, please explain.

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**I certify that the information I have provided here is true to the best of my knowledge. I understand that Sangamon County Animal Control may check civil and criminal records to verify my past compliance with all pertinent laws and regulations. I also acknowledge falsification of the above may result in my being denied an adoption of an animal or, if an animal has been adopted by me, the return of that animal to Sangamon County Animal Control. I give my permission for agents of Sangamon County Animal Control to contact my veterinarian to obtain information contained within my pet(s) records.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

2 (continued).

Breed	Name	Age	Spayed or neutered	Male or Female	Vaccinations Current?	Registered with Sangamon County

3 (continued):

4 (continued):

5 (continued):