



## Sangamon County Department of Public Health

### 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.

**PLEASE PRINT**

Name: \_\_\_\_\_  
Last First MI

Address: \_\_\_\_\_ Lot/Apt# \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_  Home  Work  Cell

Age (must be 18 or older): \_\_\_\_\_ **Photo ID Required.**

*Additional information for parts 1-5 may be provided on the back of this application.*

Do you currently  Rent  Own  Live with relatives or friends

List names of all individuals residing at your address (ex. spouse, family, friends)

\_\_\_\_\_

Landlord/Homeowner: \_\_\_\_\_ Phone: \_\_\_\_\_

**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.**

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

NAME	BREED	AGE	SPAYED OR NEUTERED?	MALE OR FEMALE?	VACCINATIONS CURRENT?	REGISTERED WITH SANGAMON COUNTY?

2. 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: \_\_\_\_\_

3. What VET are you currently using or plan to use: \_\_\_\_\_

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: \_\_\_\_\_

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: \_\_\_\_\_

[www.scdph.org](http://www.scdph.org)

Main Campus: 2833 South Grand Avenue East | Springfield, IL 62703-2175 | (217) 535-3100

Animal Control & Adoption Center: 2100 Shale Street | Springfield, IL 62703-5634 | (217) 535-3065

**For office use only: Animal info**

Name: \_\_\_\_\_

ID: A \_\_\_\_\_

Kennel/Cage: \_\_\_\_\_

Date/Time: \_\_\_\_\_

**1. Continued**

NAME	BREED	AGE	SPAYED OR NEUTERED?	MALE OR FEMALE?	VACCINATIONS CURRENT?	REGISTERED WITH SANGAMON COUNTY?

**2. Continued**

**3. Continued**

**4. Continued**

**5. Continued**