| PID# |
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Pet Surrender Questionnaire

Please complete the following form so that we may evaluate your pet's needs. with any available foster space. Completing this form does not guarantee that your pet will be placed for adoption.

| 1. Your (Owner) Name * | - | | Date / |
|---|-------------------|----------------------|-------------|
| 2. Your Address * | | | |
| 3. Phone * | | | |
| () | | | |
| 4. Email * | | | |
| (OFFICE USE ONLY) | | | |
| PID: | | | |
| | | | |
| Information about your pet (o | one pet per form) | | |
| Name of Pet * Sex of Pe | t Age of Pet* | Is the pet spayed or | neutered? * |
| | | | |
| Is the pet current on its vaccinations? | | _ | |
| Reason(s) for surrendering th | is pet: | | |
| | | | |
| How long have you had this p | | | |
| Where did you get this pet? _ | | | |
| The pet is: * | | | |
| ☐ Housebroken | | | |
| Paper trained | | | |
| ☐ Sometimes has accidents | | | |
| □ Not housebroken | | | |

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| | | ne pet crate trained? * |
| | | v many times a day is the pet exercised? * |
| | | ere is the pet kept when no one is home? * |
| | | ere does the pet sleep at night? * |
| | | v many hours is the pet left alone during the work day? |
| | | v does the pet act when left alone? * |
| | | at are your pet's favorite activities? * |
| 16. | _ | ning: * |
| | | Obedience classes |
| | | Home training |
| | | Private professional training |
| | | No formal training |
| 17. | Con | nmands known: * |
| | | Sit |
| | | Down |
| | | Stay |
| | | Come |
| | | Heel |
| | | Wait |
| | | Lay down |
| | | Speak |
| | | Shake |
| | | Roll over |
| | | Other |
| 18. | This | pet has lived in the same household with: * |
| | | Dogs |
| | | Cats |
| | | Birds |
| | | Other animals |
| | | Children (ages 0-5) |
| | | Children (ages 6-12) |
| | | Children (ages 13-18) |

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| 19. | Hov | w does the dog get along with the others noted above? |
| | | |
| 20. | Che | eck as many of the following that describe the pet's behavior and habits: |
| | | Barks/Meows a lot |
| | | Escapes yard |
| | | Friendly to people |
| | | Friendly to other cats/dogs |
| | | Separation anxiety |
| | | Digs/scratches |
| | | Chews |
| | | Unruly |
| | | Shy |
| | | Likes water/swimming |
| | | Likes riding in cars |
| | | Submissive wetter |
| | | Reserved |
| | | Affectionate |
| | | Calm |
| | | Outgoing |
| | | Growls/Hisses |
| | | Plays fetch |
| | | Jumps on people |
| | | Whines/Cries |
| | | Fearful |
| | | Playful |
| | | Chases cats/dogs |
| | | Hyperactive |
| | | Likes treats |
| | | Walks well on leash or is leash trained |
| 21. | Doe | es the pet like the company of small children? |

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| 22. | Does the pet like the company of cats? |
| 23. | Does the pet like the company of dogs? |
| 24. | Is the cat/dog overly protective of its food/toys/treats? |
| 25. | Is the dog overly protective of family? |
| 26. | Is the dog overly protective of its property? |
| 27. | How does the pet react to strangers? |
| 28. | Has this pet ever snapped at a human or other animal? If yes, please describe when and why. |
| 29. | Has this pet ever bitten a human or other animal? If yes, please describe when and why. |
| 30. | What is the pet fed, how often and how much? |
| 31. | Please list any medication currently taken or special needs the pet may have: |
| 32. | Is there anything else we should know about this pet? |
| 33. | Attach Current picture of Pet * |
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| PID# |
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| attest that the information provided on this application is true and accurate to the best of my |
| nowledge. By submitting this application to Palm Beach County Animal Care and Control, I gree and understand that PBCACC makes no guarantee of placement for his pet. |
| wners Signature * |