



DOG ADOPTION

APPLICATION FORM

Please complete this form
in full to apply to adopt a
puppy or dog from the
Animal Shelter.

Please send this form to
QUEENSTOWN LAKES DISTRICT COUNCIL
Private Bag 50072
QUEENSTOWN 9348

This information in this form will be used to assist in the adoption of an available dog and one this is suitable for you and your lifestyle.



APPLICANT DETAILS

NAME	Title (Mr, Mrs, Ms, Miss):	First:	
	Middle:	Surname:	
ADDRESS			
CONTACT	Home:	Work:	Mobile:
	Fax:	Email:	
PERSONAL	Occupation:		Date of Birth:



PROPERTY DETAILS

- What best describes your current living situation?
House Flat/Apartment Farm/Lifestyle or rural property
- If renting, do you have permission of your landlord to have a dog on the premises? Yes No
- Name and contact phone number of landlord or agent:



OTHER PETS

- Do you have any other pets? Yes No
If yes, please detail below:

SPECIES	BREED	AGE	MALE/FEMALE

If you currently own 2 dogs you will be required to obtain a permit from council to keep more than 2 dogs on your property.



MANAGEMENT

5. Is there anyone home during the day to supervise the dog? Yes No
6. Where will the dog be housed?
7. Where will the dog be kept during the day?
8. Where will the dog be kept at night?
9. How will the dog be exercised?
10. Who will be responsible for exercising the dog?
11. Do you have children?
12. If so, what are the ages of the children?



WELFARE

13. What is the main reason for you getting a dog at this time?
14. Who is your regular veterinarian?



PREVIOUS OWNERSHIP

15. Have you ever owned a dog previously? Yes No
- If yes, please detail below: ←
- | BREED | DATES WHEN DOG OWNED | ADDRESS WHERE DOG OWNED | OTHER INFORMATION |
|-------|----------------------|-------------------------|-------------------|
| | | | |
| | | | |
| | | | |
| | | | |
16. Do you have a Responsible Dog Owner status from your local council? Yes No



ADOPTERS DISCLAIMER

Please read the following information and sign at the end of this document to indicate you have understood and accept the terms and conditions of adoption from QLDC.

Dog Owners Name

Residential Address

Home Phone No

Mobile phone No

Work Phone No

1. I agree to an Animal Control Officer visiting my property as a follow up visit to check on the success of the adoption.
2. I accept that Queenstown Lakes District Council is not held responsible for any disease or illness that may develop after leaving the care of Queenstown Lakes District Council.
3. I will ensure that the dog is loved and cared for and that I will be a responsible dog owner to ensure my dog is not a nuisance to neighbours and to others.
4. Failure to comply with the above will result in the animal being uplifted by an Animal Control Officer and or Animal Welfare Agency at their discretion.

APPLICANT'S DECLARATION

I have answered the above questions honestly. I give permission for a staff member of Queenstown Lakes District Council to visit my property to conduct a property inspection and to conduct a follow up visit to my home after I have adopted a dog from the shelter.

Signed:

Dated: / /

THANK YOU

FOR COMPLETING THIS FORM. THIS INFORMATION WILL HELP US TO ADOPT A SUITABLE DOG FOR YOUR CIRCUMSTANCES. OUR AIM IS TO ACHIEVE A HAPPY OUTCOME FOR THE DOG AND FOR YOU. WE RESERVE THE RIGHT TO DECLINE THIS APPLICATION.

