



Saginaw County
Animal Care & Control
5615 Bay Road, Saginaw, MI 48604

Ph: (989)797-4500

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Cat Adoption Application & Contract

Animal ID: _____ Animal Name: _____ Date: _____

Full Name: _____

Address: _____

Street City State Zip

Phone: _____ Email: _____

Driver's License #: _____ D.O.B: _____

How many persons live at your residence? _____

How many adults? _____ How many children? _____ Please list the ages: _____

What is the reason for adopting this animal? Personal/Family Companion Child's pet

Companion for Pet Other: _____

In what type of home do you live in? Mobile Home Apartment With Parents

House Duplex

Do you rent: Yes No

If yes, please list the name and number of your landlord. *(Our staff will verify this response and their consent to have animals in the home.)*

How many pets do you currently own? _____

Please list all animals that live with you. Include those which you do not own.

	Name	Age	Gender	Breed	Spayed/Neutered
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____

Do you have any restrictions at your place of residence that may prohibit you from having this animal?

Adoption Contract

In consideration of being able to adopt the above-named animal, I agree to the following
(please initial):

_____ The above information I have provided to SCACC is true to the best of my knowledge.

_____ The animal will be provided daily with adequate fresh food and water, clean, dry shelter, vet care (as needed), humane treatment, supervision, and exercise.

_____ To obey all applicable local and state laws governing the control, care, and custody of this animal.

_____ To provide all medical care and treatment needed by the animal including but not limited to annual medical checkups, vaccines, and preventative heartworm medication.

_____ To adopt the animal only as a personal pet/companion and not as a gift, working animal, nor as a primarily outdoor pet.

_____ I understand SCACC will always take their animals back however I may not receive a reimbursement for the adoption fee.

_____ I understand that SCACC has limited information about the animal's history and can't make any warranties about the animal's health, personality, temperament, or compatibility with my household. I accept the animal in its "as is" condition. I understand that SCACC makes no guarantee as to the health, history, behavior, breed or age of this animal. I accept all risks relating to same.

_____ I understand that all cats are spayed or neutered before adoption.

_____ I acknowledge that shelter animals have an increased risk of potential exposure to disease, and therefore may be incubating diseases that are undetected by shelter staff. I accept all risks relating to same.

_____ I acknowledge that although SCACC has a veterinarian, there may be occasions where a diagnosis or condition of this animal may be dormant or not obvious prior to adoption.

_____ In the event that this animal becomes sick before I take possession, this adoption will be cancelled, refunded, or another adoptable animal may be chosen.

_____ I understand that unless otherwise stated, the animal has not been treated for or vaccinated against any diseases. I will take this pet to a veterinary office for an exam and any necessary care and vaccines within 7-10 days following adoption and at my sole expense. I will also have my pet examined and vaccinated annually, or as recommended by a veterinarian, at my sole expense.

_____ If I move, change address, phone numbers or email, I understand I should update the microchip and license information.

_____ In the event my pet becomes lost, I will search for it at local animal shelters and online and make every reasonable effort to locate and reclaim the animal.

_____ I will at no time assert any claim, charge, or demand of any kind or nature against Saginaw County or SCACC for any charges or expenses, including veterinary fees, in connection with this animal.

_____ I understand that SCACC reserves the right to refuse any adoption based on the best interest of the animal or the community.

_____ I understand that there is no guarantee this animal is housebroken or litter box trained. I will take necessary steps to properly train the pet in this regard.

_____ I agree not to leave any child unsupervised around this animal.

_____ This contract may be specifically enforceable by Saginaw County and SCACC through judicial proceedings, including the right to recover the animal due to a breach of any terms of this contract. I hereby agree that in the event I breach this contract, and Saginaw County or SCACC files suit to enforce this contract or to defend any claim under this contract, that I will pay any court costs and attorney's fees incurred by SCACC in connection herewith.

_____ I accept that SCACC assumes no responsibility nor shall it be held liable for any damages caused by the adopted animal to property, persons or other pets. If any medical problems should occur after adoption, to the pet or any individual exposed to the pet, SCACC is not liable for any medical bills.

_____ As the Adopter, I agree to accept full legal and financial responsibility for the care of this animal, releasing Saginaw County, SCACC and their representatives of any liability or costs incurred from this date forward.

Signature: _____ Date: _____

Printed Name: _____ Date: _____

SCACC Representative: _____ Date: _____

Initials of SCACC Representative who did meet and greet: _____

Additional Comments: _____

