



NEW HARTFORD

A TOWN FOR ALL SEASONS

Animal Control

Dog Adoption Questionnaire

Email: dlaplante@newhartfordct.gov

Name _____	Email _____
Address _____	

Primary Phone: _____	Alternate Phone: _____

1. Do you currently live in a House ____ Apartment ____ Condo ____ Other _____?
2. Do you currently Own ____ Rent ____ (if rent Landlord must permit pets)
3. How long have you lived at your current address? _____
4. How many adults live in your home? ____ How many children? ____ Ages? ____
5. Does anyone in your household have allergies? _____
6. What are your reasons for wanting this dog? (check all that apply)
Companion ____ Guard Dog ____ Hunting ____ Breeding ____ Obedience Training ____
Search & Rescue ____ Agility ____ Jogging ____ Walking Buddy ____ Couch Warmer ____
Other _____
7. Do you have other pets? Yes ____ No ____ Are their vaccinations current? Yes ____ No ____
8. Number and description of other pets: _____
9. Do you have a regular veterinarian? Yes ____ No ____
Veterinary Practice Name _____ Phone Number _____
10. If you previously had dogs, where are they now? _____
11. Where will dog be kept during the day? _____
12. Where will dog be kept at night? _____
13. Do you have a fenced in yard? Yes ____ No ____ If not, how will dog be kept from leaving property?

Signed: _____ Date _____



Town Hall: 530 Main Street • Post Office Box 316 • New Hartford, CT 06057 • P: 860.379.3389 • F: 860.379.0940 • www.town.new-hartford.ct.us

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