

# CCACS DOG INFORMATION & SURRENDER AGREEMENT



**\*Please complete one form for each animal being surrendered.** The core purpose of the CCACS is to promote and practice the principle that every life is precious. CCACS makes every attempt to find safe and loving homes for the **adoptable pets surrendered to us however, this is not always possible.** **The detailed and accurate information you provide us makes it easier for us to place your pet in an appropriate home.**

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

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Dog's name: \_\_\_\_\_ Age: \_\_\_\_\_ Breed: \_\_\_\_\_ Sex: \_\_\_\_\_

Is your pet spayed or neutered? YES NO How long has this pet been in your care? \_\_\_\_\_

When was your dog last at a veterinarian? \_\_\_\_\_ Veterinarian's Name? \_\_\_\_\_

Please list any major medical conditions that we should know about: \_\_\_\_\_

Reason for relinquishing ownership: \_\_\_\_\_

Please list any major or minor behavior problems your dog exhibits: (ex. food aggression, digging, barking too much, chewing things up, etc. ) \_\_\_\_\_  
\_\_\_\_\_

How does your dog respond to visitors or strangers? \_\_\_\_\_  
\_\_\_\_\_

Has your dog ever tried to bite or cause harm to a person? YES NO If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

How many animals does this dog live with? Dogs \_\_\_\_\_ Cats \_\_\_\_\_ Other \_\_\_\_\_

Has the dog ever harmed an animal? YES NO If yes, explain: \_\_\_\_\_

Is he/she good with other dogs? YES NO SOMETIMES DON'T KNOW

Good with cats? YES NO SOMETIMES DON'T KNOW If no, please describe problem: \_\_\_\_\_  
\_\_\_\_\_

Does your dog like children? YES NO DON'T KNOW If yes, what age children has he/she been exposed to? \_\_\_\_\_

List 4 positive personality traits: \_\_\_\_\_  
\_\_\_\_\_

(over please)

Is your dog housebroken? YES NO DON'T KNOW How often and when does your dog make a bathroom mistake in the house? \_\_\_\_\_ What is his/her cue to go outside? \_\_\_\_\_

Where did the dog spend the day when left home alone? INSIDE OUTSIDE If inside, is he/she contained to a crate or room? \_\_\_\_\_

If outside, how was the dog confined to your property? NOT CONFINED FENCE CABLE RUNNER PEN CHAIN  
If fenced, how tall was the fence? \_\_\_\_\_ Did the dog ever try to escape? YES NO If yes, how, when? \_\_\_\_\_

Where did the dog spend his/her time when you are home? \_\_\_\_\_

Can he/she be left alone inside, without incident? YES NO If no, has the dog ever been inside? YES NO

Please explain any destructive incidents: \_\_\_\_\_

Has the dog been through any obedience training? If so, to what extent? \_\_\_\_\_

List 4 places your pet has been, besides your home: (ex., park, vets) \_\_\_\_\_

Please tell us about any special toy or food preference: \_\_\_\_\_

By signing this form you agree to release all medical records for this animal to the Chippewa County Animal Control Shelter. To the best of my knowledge, the animal has not bitten anyone within the 10 days immediately prior to the date of surrender and all information about the animal given by me to CCACS is true. I understand and hereby certify that: (i) **I am the true and rightful owner of the animal or animals that I have surrendered this day to CCACS,** (ii) **no other person has any right of property in such animal or animals,** (iii) The decision to put the animal into the adoption program or humanely put to sleep (euthanize) may be made upon arrival. The decision may be made based on temperament, health, age and history, and (iv) **I am conveying full and complete right, title and interest in and to the animal or animals to the CCACS.**

Date: \_\_\_\_\_ Signature of Owner: \_\_\_\_\_