



**SASKATOON  
ANIMAL  
CONTROL  
AGENCY**

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**5028 Clarence Ave  
Grasswood, SK S7T 1A7  
Phone: (306) 385-7387  
Fax: (306) 931-9792**

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## **Cat Adoption Application Form**

Thank you for your interest in one of our adoptable cats! Please complete the related form in full. If you have any questions or concerns, or if you need assistance, please call us during our business hours.

Please note: If you rent your home, please complete our application prior to attending our location and make your landlord aware of the forthcoming adoption.

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### **Contact Information**

Name:

Address: house number, street name, city, province, postal code

Date of Birth:

Phone #:

Please provide any contacts numbers that would assist in returning the animal, should it be found, including, home, cell and work numbers.

Date of Birth: MM/DD/YYYY

e-mail:

Please note, you must be 18 years of age or older to adopt and must present an identification showing your address of residence.

### **Residence Information**

Please select the applicable option:

I own my home     I live with family/friends     I rent

My home is a:

house     townhouse     condo/apartment     acreage/farm

If applicable, please provide landlord information: Name, phone number.  
If you reside with family or friends and they rent, please provide their landlords contact information.

1. How many people in total are in your household? \_\_\_\_\_
2. How many children under 12 years? \_\_\_\_\_
3. Are there any allergies to pets? Yes, No
4. Does everyone in your house agree to adopt a cat? Yes, No
5. Do you have other pets? Dogs, cats, other? Yes, No List below if applicable.

Species	age	sex	fixed (if no why)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

### Planning for your new pet

1. Have you owned a cat before? Yes, No
2. Have you previously relinquished or rehomed a cat? Yes, no. If yes, why? \_\_\_\_\_
3. If unable to care for this cat, how would you rehome the animal? \_\_\_\_\_
4. Are you prepared to financially provide for your cat? Yes, no  
Please list your expected expenses: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. How many hours will the animal be left home alone on a daily basis? \_\_\_\_\_
6. Have you made accommodations for or considered where the animal will stay when you are away for extended periods, such as holidays? Yes, No Please describe or detail your plan if yes \_\_\_\_\_  
\_\_\_\_\_
7. Will the cat be a strictly indoor pet? Yes, No If no, please detail your plan for supervision or confinement of your animal when outdoors \_\_\_\_\_  
\_\_\_\_\_
8. Are you aware of the related City of Saskatoon Animal Control bylaw? Yes, No
9. Do you know that a City of Saskatoon Cat License must be purchased annually for the animal? Yes, No

I give the Saskatoon Animal Control Agency consent to contact my landlord with regards to my application for adoption. Yes, No

Is there a cat you are interested in? Please list the animal ID A\_\_\_\_\_

Applicant signature \_\_\_\_\_

Date \_\_\_\_\_

For in office use only:

Applicant ID Type and number: \_\_\_\_\_

LL Consent Y / N / NA

Verified field completion: Y/N ST #: \_\_\_\_\_

