



Conner Martin
Mayor

East Hartford Animal Control Adoption Application



Mack S. Hawkins
Chief of Police

Name: _____ Birth date: _____.

Address: _____ Apt # _____.

Town: _____ State: _____ Zip code _____.

Phone # _____ Email: _____.

Do you own your home? (Y) (N) *If no, you must provide a statement from your landlord allowing you to have a dog.*

Veterinarian _____ Phone # _____.

Please list all pets currently in your home _____.

_____.

_____.

_____.

How many children in your home? _____ .What Ages are the children? _____.

_____.

What is your reason for adopting this pet? _____.

_____.

Please read and initial the following statements.

1. If the dog I am adopting is not already spayed/neutered. I will have it done within 60 days of adoption date_____.
2. I understand that adopting a pet is a commitment and agree not to rehome or abandon it in any circumstances including but not limited to, moving, behavioral issues, medical issues, birth of a child, change in career, etc._____.
3. I agree to have my dog vaccinated for rabies at all times_____.
4. I agree to have my dog licensed in the town where I live at all times_____.

Signature _____ Date _____.