



# Union County Animal Control and Shelter

1647 Jonesville Hwy Union SC 29379

**ANY ANIMAL ADOPTED FROM A SHELTER, BY SC STATE LAW, MUST BE ALTERED.**

**YOU AGREE YOU ARE ADOPTING A SHELTER ANIMAL AND THERE ARE NO HEALTH GUARANTEES; YOU ARE RESPONSIBLE FOR ALL VET COST THAT MAY OCCUR.**

Where will you animal be kept during the day? \_\_\_\_\_ Night? \_\_\_\_\_

Will you animal have access to a yard? YES NO

Is it fenced or open? \_\_\_\_\_

If fenced, type and height \_\_\_\_\_

Will you use a leash? YES NO

Are you familiar with Heartworm Disease? YES NO

Do you own other pets at this time? YES NO How Many? \_\_\_\_\_

Are they altered? YES NO

Who is your Veterinarian? \_\_\_\_\_

Veterinarian Phone Number \_\_\_\_\_

In which of the following do you live: House Apt. /town house Mobile home

Do you own \_\_\_\_\_ or rent \_\_\_\_\_?

If you rent does your landlord allow pets? YES NO

Landlords Name \_\_\_\_\_ Phone # \_\_\_\_\_

Reason for Adopting: circle all that apply

Watch dog Companion Child's pet Barn Cat Hunting Family Pet

Companion for other pet Other (specify) \_\_\_\_\_

## ADOPTION AGREEMENT

Please give careful consideration to adopting a companion animal. Animals are not toys or short-term commitments. Make sure your lifestyle allows time, patience, and expense this animal will need over the lifetime of the animal. Animals for adoption are placed with full consideration given to the specific needs of each animal.

1. Animals are placed to live in a private residence only.
2. No animal may be kept continually in a pen, garage, or on a tether.
3. The adopter must provide the animal with necessary vet care upon sickness disease, or injury. In addition, animals must be taken to the vet once a year for routine vaccinations, rabies shot, and maintained on preventive heartworm medication.
4. The animal must be maintained humanely and in accordance with all laws and ordinances in force in the jurisdiction in which the owner resides. The animal must wear proper identification.
5. If, for any reason, the adopter cannot keep an adopted animal, he/she must be returned to Union County Animal Control and Shelter.
6. The Union County Animal Control Department reserves the right to investigate, unannounced, the living conditions of any animal adopted from it and may reclaim any such animal being kept in violation of the rules and requirements of the adoption agreement.
6. The adopter assumes full financial responsibility for the animal.
7. The animal must have a rabies shot each year, and must display its current tag on his/her collar.(STATE LAW)

I, \_\_\_\_\_, the adopter, have read the seven(7) Adoption rules set forth above, understand each of them and agree to abide by each of them. I, the adopter, acknowledge a full understanding of the rules and conditions of the agreement. The adopter agrees to surrender to an agent of Union County Animal Control Department any animal adopted from the same, should the animal be maintained in violation of the rules and conditions set forth in the adoption agreement. Union County Animal Control Department agrees to accept back at any time if for any reason the adopter no longer wishes to or cannot keep the animal. I understand because there is little or no information on the history of the animal that I am financially responsible for any medical problems that may arise. I understand that if for unseen reason the animal shall die that I will not hold Union County Animal Control Department responsible. I understand that there will be no refunds of any money.

**BY SIGNING THIS AGREEMENT YOU HEREBY AGREE NOT TO GIVE THE ANIMAL AWAY, MISUSE, SELL FOR MEDICAL EXPERIMENTATION, ABUSE OR OTHERWISE ENDANGER THE HEALTH AND WELL BEING OF THIS ANIMAL. YOU ALSO AGREE TO PROVIDE APPROPRIATE MEDICAL CARE, ANNUAL SHOTS AND HEALTH CHECKUPS AS NEEDED. YOU ALSO AGREE THAT ALL MEDICAL COST IS YOUR SOLE RESPONSIBILITY. NO REFUNDS OR EXCHANGES WILL BE GIVEN IF THE ANIMAL SIMPLY DOES NOT "WORK-OUT."**

**YOU CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE. YOU UNDERSTAND THAT FALSIFICATION OF FACTS MAY LEAD TO DENIAL OF ADOPTION AND LEGAL RAMIFICATIONS. YOU AGREE NOT TO RETURN ANIMAL TO ANY SHELTER, PETSMART STORE, OR OTHER RESCUE BUT TO CONTACT Union County Animal Control and Shelter 864-429-2808. YOU ALSO AGREE THAT YOU ARE NOT TO GIVE THE ANIMAL TO ANYONE; YOU ARE ADOPTING THE ANIMAL FOR YOURSELF AND THIS ANIMAL WILL NOT BE GIVEN AS A GIFT. (THIS DOES NOT APPLY TO PARENTS ADOPTING FOR A CHILD.)**

**THERE WILL BE A \$30.00 RETURNED CHECK FEE ON ALL RETURNED CHECKS.**

**SIGNED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

NAME OF ADOPTER: \_\_\_\_\_ (Please Print)

E-mail address: \_\_\_\_\_ (Please print)

ADDRESS OF ADOPTER: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

ALL PHONES; \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

**SHELTER WILL FILL IN BELOW**

ANIMAL ID #: \_\_\_\_\_ Pet's Name \_\_\_\_\_

Breed \_\_\_\_\_ Color \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

1st vaccines – Day of Surgery \_\_\_\_\_

2nd vaccines: DUE \_\_\_\_\_, at your vet

3<sup>rd</sup> vaccine due: \_\_\_\_\_ at your vet

4<sup>th</sup> vaccine due: \_\_\_\_\_ at your vet

DE-WORMED: Date \_\_\_\_\_: OTHER: \_\_\_\_\_

It is state law that all dogs/cats be vaccinated against rabies by age 4 months old.

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