## NebraskCoons Kitten Adoption Questionnaire

## **Personal Information:**

Name:			
Home Phone:	Cell #:		-
Spouse's Name (if applicable):			
How many children in your home?	Ages: _		
Are there any others residing in your ho	me? Please List:	:	
Employer Name:	Phone:		
Employer Address:			
City:	State:	Zip:	
How long have you been there? :			
Residential Information:			
Home Address:			
City:	State:	Zip:	
Is this where the pet will live with you?			
How long have you resided at this addre	acc?		

If less than two years, what was your pre	evious address?	
Do you Rent or Own?	Apartment?	_ House?
Condo? Mobile Home?		
What happens to the pet if you move?		
If Renting, what is your Landlord's name	?	
Landlord's Phone Number:		
Have you received permission from your	landlord?	
Other Adoption Informati	on:	
Have you had experience with this partic	ular breed?	
How many hours are you away from hom	ne during the average	e work day?
Where will your pet be kept during that t	ime?	
Where will your pet be sleeping during th	e night?	
What kind of other pets do you have in the	ne home? Please list	:

Are they all current on their vaccinations?
Your Veterinarian's Name:
City: Phone Number:
Does anyone in the household have allergies?
Have you or anyone in your household ever been convicted of animal cruelty, neglect,
or abandonment?
Have you ever had to give up a pet? Please explain:
Are there any other comments you would like to make?
I, (name) certify that all information provided
this form is true. I give permission to Nebraskcoons to verify information as needed. Any
false statement could terminate potential adoption.
Signature: Date:

Please return to: Lena Roberts, 616 Sherman St, Wayne, NE 68787
Or email to: blroberts@abbnebraska.com or fax to: 402-833-5157