



Lancaster Dog Control

525 Pavement Road Bldg. 32

Lancaster, New York 14086

(716) 220-5620

Fax: (716) 683-5129

ADOPTION APPLICATION

Dog Control Incident #:

<i>Applicant/Adopter Information:</i>	
Name:	<input type="text"/>
Date of birth:	<input type="text"/>
Address:	<input type="text"/>
Phone #:	<input type="text"/>
E-Mail:	<input type="text"/>
Background check:	<input type="checkbox"/> Yes (attached) <input type="checkbox"/> No

<i>Dog Information:</i>	
Name:	<input type="text"/>
Approx. Age:	<input type="text"/>
Sex:	<input type="checkbox"/> M <input type="checkbox"/> F
Breed:	<input type="text"/>
Color:	<input type="text"/>
Spayed/Neutered:	<input type="checkbox"/> Yes <input type="checkbox"/> No (spay/neuter deposit required)
Rabies Exp.:	<input type="text"/>
License #:	<input type="text"/>

Adopter/Applicant signature: _____ Date: _____

FOR LANCASTER DOG CONTROL DEPARTMENT USE ONLY	
Background check reviewed:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Spay/neuter deposit paid:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Adoption/license fees paid:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Application status:	<input type="checkbox"/> Approved <input type="checkbox"/> Denied – Reason: _____

Reviewing Officer signature: _____ Date: _____