



# The Puppy Stop & Adopt

138 Fries Mill Road  
Turnersville, New Jersey 08012  
Phone: (856) 516-4420

## Adoption Application

Thank you for considering **The Puppy Stop & Adopt** for your future puppy! Feel proud in knowing that you are helping to save lives by giving a forever home to one of our wonderful and adorable pups!

If you have a pup in mind (or 2), the next step is **The Puppy Stop & Adopt's** Adoption Application which need to be completed and brought with you to our adoption center!

**Full Name:**

**Direct Phone #:**

**Secondary Phone #:**

**Email Address:**

**Street Address:**

**City, State & Zip:**

**How long at current address:**

**Own or Rent:**

Own

Rent

**Type of Residence:**

House

Apartment

Condo/Town-home

Mobile Home

**If renting, please provide  
landlord name & phone:**

**Any plans in moving in the near future?**

Yes

No

**If you ever do move, what  
would you do with your pets?**

**Please provide names  
and ages of all persons  
living in your household,  
starting with yourself:**

**Is everyone in agreement to adoption?**

Yes

No

**Does anyone have allergies to dogs?**

Yes

No



the  
**puppy stop & adopt**  
Adoption Application

**Do you own cats?**      Yes      No      **If yes, are they:**      Indoor      Outdoor

**Do you own:**      Chickens/Ducks      Livestock      Other Animals      None

**Are all your pets spayed/neutered?**      Yes      No

**If not, then why?**

**How many pets have you owned in the last 10 years?**

**Where are they  
now?**

**Have you ever had to give up a pet?**      Yes      No

**If so, Why?**

**Have you ever adopted before?**      Yes      No

**Who did you adopt through?**

**Reason for adopting?**

**Who would be responsible  
for the pets daily care?**

**About how many hours will the dog be left alone?**

**Where will the dog stay  
when it's home alone?**

the  
**puppy stop & adopt**  
Adoption Application

Where will the dog be at night?

How active is your family?      Very active      Somewhat      Not very      Not at all

Will the dog be included in family activities?      Yes      No

Where will the dog stay during family trips or vacations?

**Veterinarian Information:**

Veterinarian Name:

Veterinarian Phone #:

Are you able to afford unexpected medical bills for a dog?      Yes      No

What do you anticipate for annual vet bills for a dog?

What other costs do you think there will be with a dog?

What do you plan to feed your dog?

How will you exercise your dog?

Do you have a gender preference?      Male      Female      Either

Are you willing to adopt a dog with minor medical issues?      Yes      No      Depends

Would you allow The Puppy Stop & Adopt to do a home inspection prior to and after adoption?      Yes      No

the  
**puppy stop & adopt**  
Adoption Application

**References:**

Please provide two personal references

Reference 1 Name:

Reference 1 Phone #:

Reference 2 Name:

Reference 2 Phone #:

Please provide any additional comments or information that you would like for us to know in consideration to your adoption application:

By signing this form, I hereby certify that all information provided by me is accurate and complete. I understand that any misrepresentation of information may result in a rejection to your adoption application and/or the adopted pet being confiscated.

Signature:

Date:

Phone: (856) 516-4420  
Email: [tpsa@thepuppestop.net](mailto:tpsa@thepuppestop.net)