

Applicant Details



Dog Adoption Application Form

Please complete this form in full to adopt a dog or puppy from the animal shelter. Competed forms to be sent to Buller District Council, PO Box 21, Westport. 7866

First Name:		Middle Name:			Surname:		
Address:		I					
Contact Details		Home:			Mobile:		
Work:		Email address:					
Occupation:					Date of Birth:		
					ı		
Property Details			ı				
What best describes your current living situation?		House Flat / apartment			Apartment		
If renting, do you have th	he perm	nissio		dlord / agent?			
			Yes			No	
Contact details for landle agent:	ord or						
Oth an Data							
Other Pets						No	
Do you have any other n	atc?		Voc		111		
Do you have any other p	ets?	Br	Yes	Дде	Ш	No Male / Female	
Do you have any other p Species	ets?	Br	Yes eed	Age		Male / Female	
	ets?	Br		Age			
	ets?	Br		Age			
	ets?	Br		Age			
Species			eed			Male / Female	
Species			eed		I to ke		
Species If you currently have two dogs,			eed		I to ke	Male / Female	
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Where will the dog be kept at night?

How will the dog be exercised?

Who will be responsible for exercising the dog?

Do you have children?

If yes, what are the ages of the children?

Applicants Declaration

Please read the following information and sign at the end of this document to indicate you have understood and accept the terms and conditions from Buller District Council.

- 1. I agree to an Animal Management Officer visiting my property before adoption to check fencing and proposed living conditions and a follow up visit to check on the success of the adoption.
- 2. I agree to have the dog de-sexed by a veterinarian at my own expense if required.
- 3. I accept that Buller District Council is not held responsible for any diseases or illness that may develop after leaving the care of Buller District Council.
- 4. I will ensure that the dog is loved and cared for and that I will be a responsible dog owner to ensure my dog is not a nuisance to neighbours and to others.
- 5. Failure to comply with the above will result in the animal being uplifted by an Animal Management Officer and or Animal Welfare Agency at their discretion.

I,		have answered the above questions honestly and agree to the above terms and conditions.
	name	
	Signed	Date

THANK YOU

FOR COMPLETING THIS FORM. THIS INFORMATION WILL HELP US TO ADOPT A SUITABLE DOG FOR YOUR CIRCUMSTANCES. OUR AIM IS TO ACHIEVE A HAPPY OUTCOME FOR THE DOG AND FOR YOU.

WE RESERVE THE RIGHT TO DECLINE THIS APPLICATION.

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The personal information that you provide in this form will be held and protected by Buller District Council in accordance with our privacy policy (available at bullerdc.govt.nz/privacy and at council libraries and service centres) and with the Privacy Act 2020. Council's privacy policy explains how we may use and share your personal information in relation to any interaction you have with the council, and how you can access and correct that information. We recommend you familiarise yourself with this policy

