

**TOWN OF NEW WINDSOR
ANIMAL CONTROL
555 UNION AVENUE
NEW WINDSOR, NY 12553
845-563-4634**

ANIMAL OWNERSHIP TRANSFER REQUEST

Animal's Name: _____

Animal Type: Dog Puppy Date: _____

Transferee's Name: _____

Street Address: _____

Mailing address (if different): _____

Town: _____ State: _____ Zip Code: _____

Home Phone # _____ Cell Phone # _____

Email address: _____

*PLEASE print email address clearly! Will only be used to follow up with you about this transfer of ownership.

Employer: _____ Work Phone # _____

Driver's License # _____ State _____ Expires: ____ / ____

Do you live in a: House Apartment Duplex Condo Mobile Home

Do you: Own Rent Live with friends, parents, relative or guardian

If renting or living with someone else, do they allow pets? _____

Landlord's name: _____ Telephone # _____

How long have you lived at this address? _____

Do you anticipate moving in the next 6 months? _____

If you move in the future, what will you do with your pet(s)? _____

Do you have children? Yes No If Yes, how many? _____

Their ages: _____

Are they used to animals? _____

Does anyone in the household have allergies to animals? _____

If so, how will you manage with a new pet? _____

Do all members of the household know that you plan to adopt a new pet?

This animal will be Indoor Outdoor Both indoors and outdoors
Do you have other animals at home? Yes No If yes, complete section below:

Pet Species	Gender	Fixed	Age	Time Owned	Current on Shots
	M / F	Yes / No			Yes / No
	M / F	Yes / No			Yes / No
	M / F	Yes / No			Yes / No

Dogs: Do/does your dog(s) have a current license? Yes No

License # _____

[REMAINDER OF PAGE INTENTIONALLY LEFT BLANK]

Please read and initial next to each statement below

to indicate your understanding of, and consent to, the following adoption terms:

1. I agree not to sell, give away or use this animal for experimental purposes, allow it to engage in dog fighting or train the animal to attack people or animals. _____
2. I have been informed that all animals can carry and transmit disease, some of which affect people, and that these diseases may be undetectable in what appears to be a healthy animal at the time of transfer (ringworm, viruses, parasites, bacteria, upper respiratory infections, conjunctivitis and fleas.) _____
3. I am aware that animals may exhibit normal but potentially undesirable behavior including but not limited to: aggression, house soiling, biting, scratching, barking, digging, mounting, urine marking or spraying and that these abnormal behavior patterns may be difficult to manage. No one at the **TNW** has told me that this pet will NOT engage in any of these behavior patterns. _____
4. I agree that the **TNW** is in no way liable or responsible for any damage, accident or injury resulting from the placement of a dog in my household. I agree that the **TNW** is not responsible for any damage(s) which the animal may inflict on me, another person, property or the property of another and no attempt will be made by me to hold the **TNW** responsible for such damage(s). _____
5. I accept the animal as is at the time of adoption and understand that the **TNW** is not responsible for any medical conditions not readily detected or detectable prior to the time of this transfer. _____
6. I acknowledge that I have read this agreement and hereby release the **TNW** from any present or future liability associated with my acceptance of this animal. _____
7. I understand that it is mandatory all animals transferred must be spayed or neutered. I understand if I am accepting a puppy from **TNW** that is too young to be altered at the time of acceptance, this animal must be altered before it is 5 months old. _____

By signing below, I certify that the information that I have given is true. This animal will reside in my home as a pet and not be used for breeding or profit. I will provide this animal with adequate food, water, shelter, training, affection, grooming, medical care and humane treatment at all times.

Ownership Transferee's Printed Name: _____

Ownership Transferee's Signature: _____

Town of New Windsor Animal Control Officer: _____ Date: _____