

Prince William County Animal Care and Control

14807 BRISTOW ROAD
MANASSAS, VA 20112
Phone: (703) 792-6465

Adoption Contract

OCR-E20288-F003-P0

Case ID
Species
Pet Name
Primary Breed
Crossbreed
Gender
Fee
Proof of Spay/Neuter - Not Required

SAR#: _____ Tag#: _____ Receipt#: _____

A. General Information

Animals are different from human beings in their response to human actions and that the actions of animals are often unpredictable. The Prince William County Animal Control Bureau makes no claims or representations as to the behavior or temperament of animals put up for adoption. The pet you are adopting from the Prince William County Animal Shelter has not received a complete physical from a licensed veterinarian and its health and health history is not known.

B. Spay/Neuter Required:

STERILIZATION OF THIS ANIMAL IS REQUIRED UNDER ARTICLE 1, SECTION 3.2-6575 OF THE CODE OF VIRGINIA by _____ (Date). A PERSON WHO VIOLATES THIS ARTICLE IS SUBJECT TO CIVIL PENALTY. THE NEW OWNER MAY BE COMPELLED TO COMPLY WITH THE PROVISIONS OF THIS ARTICLE. All spays/neuters will be completed by the Prince William County Animal Shelter's contracted veterinarian at the time of adoption. If the animal cannot be altered at the time of adoption, it will be returned to the shelter for sterilization on the date provided below. Initial _____

I agree to pick up the animal at the scheduled time provided by the veterinary hospital. Pursuant to Article 1, section 3.2-6504 of the Code of Virginia, it is unlawful to abandon any animal.

DATE TO RETURN TO SHELTER FOR SURGERY (BY NOON): _____

APPROXIMATE SURGERY DATE: _____

VETERINARY HOSPITAL & PHONE#: _____

PLEASE CALL HOSPITAL TO CONFIRM PICK UP DATE & TIME

C. Refund Information:

Fees paid to the County will be refunded if the animal dies due to illness within twenty-one (21) days of the date of this contract. Upon a veterinarian's recommendation, fees paid to the County will be refunded if the animal becomes sick and is returned to the Prince William County Animal Shelter within twenty-one (21) days of the date of adoption. If the adopter chooses to have a veterinarian treat the animal for the illness, EXPENSES INCURRED WILL BE BORNE ENTIRELY BY THE ADOPTER.

D. Pet Ownership Legal Requirements

By signing below, you agree to adhere to the following legal requirements:

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1. I agree to have the animal, if it is a DOG, vaccinated against the rabies virus at the age of four (4) months or older.
 2. I agree to purchase the appropriate DOG license tag for the County or City of residence, and to attach that tag to the collar that the dog must wear when off my property.
 3. I agree to have the animal, if it is a CAT, vaccinated against the rabies virus at the age of four (4) months or older.
 4. I agree to feed the animal each day, have drinking water available at all times, and furnish a weather-proof animal house or to provide shelter in my home.
 5. I agree to keep the animal on my property or within my control at all times.
 6. I agree not to sell, trade, or give away the animal. If at any time I can no longer care for or keep the animal, I agree to return it to the Prince William County Animal Shelter. Animals cannot be adopted as gifts.
- Initial _____

E. Animal Research and Unwanted Pets

Animals adopted from the Prince William County Animal Shelter may NOT be used for RESEARCH purposes. If at any time you can no longer care for or keep the animal, your signature below denotes you will return the animal to the Prince William County Animal Shelter.

F. Final Declarations

By signing below, I affirm the following:

1. I have not been convicted of animal cruelty, neglect, or abandonment and no such charge against me is currently pending. Initial _____
2. I declare that there are no restrictions regarding pet ownership at my place of residence that would prohibit the keeping of the above-described animal at said residence.
3. The Prince William cCunty Animal Shelter reserves the right to repossess the animal in the event of misrepresentation of any facts given by the adopter to the Animal Shelter; if the animal's home is found to be injurious to the health, safety or welfare of the animal; or the adopter fails to comply with any of the provisions of this contract.
4. I hereby accept possession and title of this animal at my own risk, and hereby release and waive any right against Prince William County Animal Control Bureau and its employees and Prince William County, which I may have now or in the future, for any damages to person or property caused by said animal and to any health problems the animal may have now or in the future. Furthermore, I affirm the Prince William County Animal Control Bureau has disclosed any known bite history on the animal I am adopting. Initial _____

Adopter:

Signature: _____ Date: _____

PWCACB Witness:

Signature: _____ Date: _____

A Nationally Accredited Law Enforcement Agency

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CERTIFICATE OF ADOPTION AND VETERINARY EXAM VOUCHER

This voucher entitles: _____

who adopted ID#: _____

from the Prince William County Animal Shelter on: _____

to a complimentary pet health exam for a dog or cat at one of the below listed veterinarians:

Battlefield Animal Clinic
Caring Hands Animal Hospital of Bristow
Dale City Animal Hospital
Dumfries Animal Hospital
Independent Hill Veterinary Clinic
Montclair Animal Hospital
Ohana Veterinary Care
Prince William Animal Hospital
Signal Hill Animal Clinic
Stonewall Veterinary Clinic
Woodbridge Animal Hospital
Old Bridge Animal Hospital
Banfield Pet Hospitals located at:
8079 Sudley RD
12449 Hedges Run Drive
13241 Gateway Center Drive

Blooms Crossing Animal Hospital
Crossroads Animal Care Center
Deepwood Veterinary Clinic
Healthy PAWS Medical Center
Mapleshade Animal Hospital
Minnieville Animal Hospital
Pet Centre Animal Hospital
River Oaks Veterinary Clinic
Staples Mill Animal Hospital
Tackett's Mill Veterinary Hospital
Old Towne Veterinary Clinic

The Veterinarian will provide one introductory health examination and consultation at no charge for new owners. This is a risk-free way to learn about the care and attention the pet may need.

This does NOT include vaccinations, deworming or any other treatments deemed necessary.

This certificate expires on: _____