

## **Colonial Newfoundland Rescue, Inc.**

## Placement Agreement & Questionnaire

APPLICAN	NT INFORMATION		If extra spa	ce is needed, please use l	last page or attach additional page		
Name 1:		Phone:		_ Email:			
Name 2:		Phone:		_ Email:			
Address:		City:		State:	Zip:		
Occupation	1:	Occupat	ion 2:				
Please list a	ll other individuals living in	the home:					
Name 1:		Relationship to applica	nt:		Age:		
Name 2:		Relationship to applica	nt:		Age:		
Name 3:		Relationship to applica	nt:		Age:		
Name 4:		Relationship to applica	nt:		Age:		
Is everyone	living in the home agreeal	onvicted of animal cruelty, negled ole to adding a rescued Newfound ne adopted Newfoundland:	dland to the fa	mily:	☐ Yes ☐ No		
RESIDEN	ICE						
If you have Are there ar	a landlord, has he/she given y covenants and/or restrict	Rent  Townhome  Condo  en you permission to adopt a dog tions on pets where you live:  yes, where and how many:	<b>j</b> :		☐ Yes ☐ No		
		yes, where and how many:					
FENCE	Fenced yard:   Yes No If yes, what height: Type:						
DOG'S LIVING CONDITIONS	Outside in kennel O	y ( <i>Please check all that apply</i> ): ☐ L Dutside tied out ☐ Garage ☐ Ot ght:	her:How ma	ny hours will dog b	pe alone daily:		
PET EXPI	ERIENCE						
DOG OWNERSHIP	Have you ever bred a dog:  Yes No If yes, please explain: Have you ever trained a dog:  Yes No If yes, please explain: Please tell us about your dogs below.						
	Name:	Breed:	Age:	Years owned:	Spayed/Neutered		
	Name:	Breed:	Age:	Years owned:	Spayed/Neutered		
	Name:	Breed:	Age:	Years owned:	Spayed/Neutered		
	Name:	Breed:	Age:	Years owned:	Spayed/Neutered		

PAST DOGS	Name:	Breed:	Yrs owned:	Cause of de	eath:	Age at Death:		
2003	Name:	Breed:	Yrs owned:	Cause of death:		Age at Death:		
	Name:	Breed:	Yrs owned:	Cause of de	eath:	Age at Death:		
	Name:	Breed:	Yrs owned:	Cause of de	eath:	Age at Death:		
		Breed:				Age at Death:		
CATS	Do you have	cats: 🔲 Yes 🔲 No If yes	how many:	Plea	ase describe below.			
	Name:	🔲 Indoor	☐ Outdoor ☐ Both	Age:	☐ Male ☐ Female	☐ Spayed/Neutered		
	Name:	🔲 Indoor	☐ Outdoor ☐ Both	Age:	☐ Male ☐ Female	☐ Spayed/Neutered		
		🔲 Indoor				□ Spayed/Neutered		
	Name:	Indoor	☐ Outdoor ☐ Both	Age:	☐ Male ☐ Female	☐ Spayed/Neutered		
OTHER PETS	Please list any	y other pets you have in y	our home or on your	property:				
ABOUT	What do you	most enjoy about having	dogs:					
YOU	What do you most enjoy about having dogs:  What do you least enjoy about having dogs:							
	If you've never had a dog, what do you expect from getting one:							
	Please describe the ideal dog for your home and family:							
you may di realize you 1)	•							
2) 3)	<ul><li>Are you willing to spend 15 min. every other day on grooming, or more time during shedding se</li><li>Are you prepared to accept the increased costs of medical care, emergency appointments,</li></ul>					asons: 🔲 Yes 🔲 No		
3)	,	etc. due to the giant size		, ,		☐ Yes ☐ No		
4)		g to pay for formal trainin			, 3 3	☐ Yes ☐ No		
5) Please describe problems you feel are intolerable, (such as biting, chewing, jumping, pulling					, jumping, pulling on a	leash,		
	food aggressi	on, separation anxiety, et	c.):					
REFERE	NCES							
Please prov Other helpf	ride information ul references w	for three character refere ould be an employer, neig	nces, your veterinaria hbor, friend who own	an (if you have s a giant bree	e one), and your landlo d dog (St. Bernard, Ma	ord (if you rent). astiff, etc.).		
Veterinarian:		Address:			Phone:			
Name:		Relationship:	Yrs known:	_ Occupation:	Phone:			
Name:		Relationship:	Yrs known:	_ Occupation:	Phone:			
Name:		Relationship:	Yrs known:	_ Occupation:	Phone:			
Name:		Relationship:	Yrs known:	_ Occupation:	Phone:			
Name:		Relationship:	Yrs known:	_ Occupation:	Phone:			

Ple	Please list any and all preferences you have for adopting a Ne	ewfoundland (check all that apply):					
	☐ Male ☐ Female ☐ Adult ☐ Senior ☐ Puppy, age:	Bronze (brown) 🔲 Black 🔲 Landseer 🔲 Mix 🔲 Purebred					
<u> </u>	$\square$ Special needs $\square$ Abused dog $\square$ Training required $\square$ Other	ner:					
Ηον	How long are you willing to wait for your Newfoundland:						
Ηον	How did you hear about CNR:						
	CNR will cooperate with breeders who have dogs needing pla part of the rescue network. Would you like to be referred to t	acement. We do not screen these dogs, and technically, they are not these breeders:					
ΑC	ADOPTION CRITERIA						
Ple	Please review the following adoption criteria of the Colonial N	Newfoundland Rescue (CNR)					
•	<ul> <li>Dog must be an inside pet.</li> </ul>						
•	Your home must provide a safe environment where the dog will be cared for humanely, including adequate food, water, veterinary care, and shelter from weather. The dog must be licensed in accordance with the laws of your jurisdiction. The dog should be exercised in a fenced yard or on a leash. OUR RESCUES SHOULD NEVER BE ALLOWED TO RUN LOOSE and should be tattooed or microchipped for identification and/or always carry i.d. tags.						
•	<ul> <li>You have never been convicted of animal cruelty, neglect</li> </ul>	ct, or abandonment.					
•	Newfoundland dogs will only be placed in private homes. The adopted Newfoundland dog may not be used as a guard/attack dog for a business. The adopted Newfoundland dog may not be used for medical or other experimental purposes. Newfoundland dogs are best kept in close proximity to their families. They should never be chained or tied-out.						
•	CNR should not be used as an inexpensive source for obtaining a Newfoundland dog. Rescue dogs will be spayed/neutered prior to placement. If this is not possible due to age or health conditions, the dog must be returned to CNR at the proper time for this procedure.						
•	A refresher obedience class is urged to establish a quicket.	er bond of respect and rapport between you and your new dog.					
•	services, transportation, boarding, grooming, etc. If, for family and/or dog, the adopted Newfoundland must be represented that a CNR reserves the right to follow-understood that a CNR representative may examine and condition of the dog, or the conditions in which it is living	arged to help defray the expenses incurred by CNR for veterinary whatever reason, the adoption does not work to the advantage of the returned to the CNR. You may not transfer ownership of the adopted y-up on the placement of the dog to ensure the dog's well-being. It is inquire about the adopted dog at any time, and if not satisfied with the log, the dog may be reclaimed by CNR immediately. If legal action ners will be responsible for all legal fees and court costs incurred by					
•	It is agreed and understood that the Colonial Newfoundland Rescue Inc. members, and others working for and/or associated with the Club, shall not be responsible for any damage or injury caused by a Newfoundland placed through the CNR. Every effort is made by the CNR Rescue Committee to test and evaluate the stability of the Newfoundland dog before placement.						
All res una gua	All of the information I have given in this document is true ar reside in my home as a pet. I agree to provide the dog with a understand the temperament, habits, and physical condition	DERSTAND THE ABOVE CRITERIA, AND I WILL COMPLY.  nd complete. Should a Newfoundland dog be placed in my home it will adequate food, water, shelter, affection, and medical care. I of the dogs available for adoption have been screened, but cannot be in no way liable or responsible for any damage, accident/injury					
API	APPLICANT 1, printed name DATE	APPLICANT 1, signature (type name between slashes e.g./John Smith/)					
API	APPLICANT 2, printed name DATÉ	APPLICANT 2, signture (type name between slashes e.g./John Smith/)					
Ple	Please return this completed form to: Donna McConn Colonial Newfoundland PO Box 305 Amissville, VA 20106	d Rescue, Inc.					

cell: 703-967-1000

info@colonialnewfrescue.org