



# Marion County Board of County Commissioners

## Animal Services

5701 SE 66th St.  
Ocala, FL 34480  
Phone: 352-671-8727  
Fax: 352-671-8717

Office Use Only:
Person ID: _____
Animal ID: _____
Scanned: _____

## **DOG SURRENDER QUESTIONNAIRE**

Please be advised, completing this application does not guarantee acceptance by Marion County Animal Services.

OWNER INFORMATION			
Last Name:	First Name:	Date:	
Address:	City:	State:	Zip:
Phone#:	Alt. Phone#:	DOB:	
DL#:	Email:		
Are you the legal owner of the dog? <input type="checkbox"/> Yes <input type="checkbox"/> No			
ANIMAL INFORMATION			
Dog's Name:		Age:	
Dog's Breed:	Dog's Gender:	Spayed/Neutered: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Dog's Color:		Approximate Weight:	
Is your dog microchipped? <input type="checkbox"/> Yes <input type="checkbox"/> No	If so what is the microchip number?		
Has your dog bitten anyone in the last 10 days? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes when?		
Has your dog ever bitten anyone? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please explain:		
HISTORY			
Where did you get your dog?			
Have you ever surrendered a pet to us before? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Reason for surrendering your dog:			
What have you done to fix the issue?			

*Empowering Marion for Success*

[www.marioncountyfl.org](http://www.marioncountyfl.org)

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**MEDICAL**

**Which veterinarian office do you use?**

Is your dog current with vaccines?  Yes  No

Is your dog currently on any medications or special food?  Yes  No

Is your dog on flea and tick prevention?  Yes  No

Is your dog on heartworm prevention?  Yes  No

Does your dog have any current or past medical issues? If yes, please explain:  Yes  No

**BEHAVIOR**

How does your dog **usually** behave towards the following? Please check boxes for all that apply.

	Never Encounter	Friendly	Afraid	Shows Teeth or Growls	Snaps	Bites	Other (Explain)
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**Familiar people**

Men	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Women	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____

**Unfamiliar people**

Men	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Women	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____

**Animals your dog knows**

Dogs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Cats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____

**Unfamiliar Animals**

Dogs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Cats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____

**Where does your dog spend most of its time during the day?**

**Where does your dog spend most of its time at night?**

Is your dog house-trained?  Yes  No      Is your dog crate-trained?  Yes  No

If your dog is **not** fully house-trained: Please check boxes for all that apply.

Lift leg/mark territory <input type="checkbox"/> Yes <input type="checkbox"/> No	Have accidents in crate <input type="checkbox"/> Yes <input type="checkbox"/> No
Can't be alone <input type="checkbox"/> Yes <input type="checkbox"/> No	Use puppy pads <input type="checkbox"/> Yes <input type="checkbox"/> No

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**BEHAVIOR (continued)**

**Urinate when excited**       Yes    No      **Other:** \_\_\_\_\_

**What does your dog do to let you know it needs to go outside?:**

Does your dog chase any of the following?: *Please check boxes for all that apply.*

**Joggers**       Yes    No      **Bicycles**       Yes    No

**Skateboard/Rollerbladers**       Yes    No      **Cars/Motorcycles**       Yes    No

**Outdoor Cats**       Yes    No      **Other:** \_\_\_\_\_

**Is your dog leash trained?**       Yes    No

What commands does your dog know?: *Please check boxes for all that apply.*

**No**    **Sit**    **Down**    **Come**    **Stay**    **Heel**    **Other:** \_\_\_\_\_

**Does your dog jump fences?**    Yes    No      **How tall is the fence?** \_\_\_\_\_      **What type of fence?** \_\_\_\_\_

**Does he dig under fences?**       Yes    No      **Does your dog have problems riding in the car?**       Yes    No

**Where is your dog kept when he/she is left alone?**

**What type of food does your dog eat?**

**What does your dog dislike or fear?**

**What kind of toys does your dog like?**

**What kind of treats does your dog like?**

**What type of bedding does your dog like?**

**Is there anything else a future owner should know about your dog?**

**OWNER ACKNOWLEDGMENT**

"I" hereby declare that I am, or am acting on behalf of, the legal and rightful owner of the animal(s) described above, and hereby affirm, acknowledge, warrant and represent that all information contained in this profile is true and correct to the best of my knowledge and belief.

**Owner's Signature:** \_\_\_\_\_      **Date:** \_\_\_\_\_

**-STAFF USE ONLY-**

**Impound Number:** \_\_\_\_\_      **Animal ID:** \_\_\_\_\_      **Person ID:** \_\_\_\_\_

**Staff Signature:** \_\_\_\_\_      **Date:** \_\_\_\_\_

**NOTES**