



## Owner Pet Surrender Form CAT

Note: Owned animals are those contained for at least 30 days and turned in by those residing in same household.

Pet ID# \_\_\_\_\_ Date Surrendered: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Best contact number: \_\_\_\_\_ Email: \_\_\_\_\_

Pet Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Spayed/Neutered:  Yes  
 No

Breed: \_\_\_\_\_ Description of pet: \_\_\_\_\_

Why are you surrendering this cat? \_\_\_\_\_

How long have you had this cat? \_\_\_\_\_ Where did you get this cat? \_\_\_\_\_

Is your cat declawed?  No  Yes  Front  Back  Both front and back

Please list all known health issues: \_\_\_\_\_

Veterinarian? \_\_\_\_\_ Last visit? \_\_\_\_\_ Are health records available?  Yes  
 No

Is your cat currently on any medication?  Yes  No **If yes, what type?**  
\_\_\_\_\_

Is your cat current on vaccinations?  Yes  No Heartworm/flea preventives?  Yes  No

How does your cat behave at the vet's office?  Flighty but able to be handled  Needs to be sedated

Calm  Social  Never been

Does your cat ride well in a car?  Yes  No **If no, please describe behavior:** \_\_\_\_\_

Any known aggression issues?  Yes  No (*If yes explain.*): \_\_\_\_\_

Has this cat bitten or scratched a human within the last ten (10) days.  Yes  No

If yes - Date of incident: \_\_\_\_\_ Victim: \_\_\_\_\_ Circumstances: \_\_\_\_\_

Where does your cat spend the majority of their time?  Inside  Outside  Both inside and outside

Does your cat have access to the whole house?  Yes  No If no, please explain:  
\_\_\_\_\_

Did you allow your cat on the furniture?  Yes  No Did they scratch the furniture?  Always  Sometimes  No

What time of day is your cat most active?  Morning  Afternoon  Evening  Night

Where does your cat sleep at night? \_\_\_\_\_

How does your cat let you know it wants to go outside? (if applicable): \_\_\_\_\_

What brand of food does your cat eat? Dry food: \_\_\_\_\_ Wet food: \_\_\_\_\_

How often does your cat eat wet food daily? \_\_\_\_\_ Did you free feed dry food?  Yes  No

If no, please explain: \_\_\_\_\_

Is pet litterbox trained?  Yes  No Always uses the litterbox?  Yes  No

If no, please explain: \_\_\_\_\_

If yes, type of litter used, box style, placement preference: \_\_\_\_\_

How many litter boxes are in your home? \_\_\_\_\_ Upstairs: \_\_\_\_\_ Downstairs: \_\_\_\_\_

Describe your cat's behavior: (mark all that apply)  Very active  Couch Potato  Easy going  Moody  Curious

Friendly with Family  Friendly with visitors  Playful  Talkative  Quiet  Affectionate

Independent  Attention Seeking

Shy with family (please explain): \_\_\_\_\_

Shy with strangers (please explain): \_\_\_\_\_

Needs to be an only pet (please explain): \_\_\_\_\_

Does your cat like (check all that apply):  Men  Women  Children  Other cats  Dogs  Other pets:

\_\_\_\_\_

Has your cat regularly been around children:  Yes  No **If yes,**  Lived with or  Visited

If yes, Please indicate age range:  0-2yrs  3-5 yrs  6-10 yrs  11-14 yrs  15-18 yrs.

Does your cat live with other pets?  Yes  No If yes, how many? \_\_\_\_\_ What types?

\_\_\_\_\_

How does your cat behave around dogs?  Never been around dogs  Friendly  Scared of dogs  Ignored dogs

Aggressive towards dogs **Please explain:**

\_\_\_\_\_

How does your cat behave around other cats?  Never been around cats  Friendly  Scared of cats  Ignored cats

Aggressive towards cats **Please explain:** \_\_\_\_\_

What is your cat's play style:  Likes to play rough, may bite or scratch  Likes to chase and pounce on toys  
 Fetch  Climbs on things  Plays with other cats  Plays in water  Uses batting toys  Laser Pointer

Does your cat (check all that apply):  Like to be held  Like to be brushed  Like to be picked up  
 Uses scratching post  Claw furniture  Claw drapes  Spray in the house  Dig in plants/Chew plants

Where does your cat like to be pet?  Head only  Head and back  Full body  Tail  Stomach  Does not like

I voluntarily surrender this pet and relinquish ownership. I understand any decision to return this pet will require me to apply for adoption and will be contingent upon approval. All information provided is accurate and complete. I understand every attempt will be made to find this animal a home, however, FHS *cannot* guarantee the outcome.

\_\_\_\_\_  
Pet Owner Signature

\_\_\_\_\_  
Date

Employee Completing Form: \_\_\_\_\_