



PACFA: Paws and People Foster Inspection form:

1. Foster Information:

Foster Parent Name: _____

Street Address: _____

City: _____ **State:** _____ **zip code:** _____

Home phone: _____ **Cell:** _____ **work** _____

e-mail: _____ **text:** _____

2. Date of Inspection: _____

a. Number and species of pet animals that reside permanently at this address:

Number of dogs: _____ **Number of cats:** _____

Specific characteristics/disclosures in regard to a foster animal joining the household. _____

b. Foster pet contained on property? _____

Describe: (fencing, kennel, protective shelter): _____

c. Foster pet protected from injury? _____

d. Outside animals restricted from entry? _____

e. Clean water and water bowls always accessible? _____

f. Adequate lighting, ventilation, heating, cooling? _____

g. Enclosures cleaned and sanitized? _____

h. Pet protected from water and weather? _____

i. Adequate room for the animal to move around/exercised? _____

j. Food containers clean and food fresh and appropriate? _____

k. Pets can be separated if needed? _____

l. Required relationship with veterinarian: reference: Name: _____

Phone: _____ **Address:** _____

m. Pets observed and interacted with daily? _____ **How often?** _____

n. Animal waste removed daily? _____ **(more often?)** _____

o. Home and grounds kept clean and free of trash? _____

Signature of Inspecting individual: _____ **Date:** _____

Signature of foster care provider: _____ **Date:** _____

PACFA Paws and People Foster Care Information and Agreement:

1. Foster Parent's Name _____
2. Street Address: _____
3. City: _____ State: _____ Zip code: _____
4. Home phone: _____ Cell: _____ Work: _____ Text: _____
e-mail: _____
5. Are you a part of any animal organization? _____ If yes which one? _____
6. Why would you like to foster for Paws and People?

7. Do you own your home? _____ If not do you have permission to have pets?

Do you have a long-term lease or agreement?

8. Do you have a fenced yard? _____ height of fence: _____
9. How many adults live at this address? _____
10. Are there any children? _____ If yes how many and what are their ages?
_____ Are they accustomed to pets? _____
11. What hours are you home during the day?

12. How many hours will the foster animal be left alone?

13. Where will the foster animal be when you are gone?

14. Where will the foster animal sleep? _____
15. Please list any dogs or cats you have at home now, include: age, breed, sex and any considerations in physical health or temperament.

16. Are all of your pets vaccinated, spayed/neutered , and up to date on veterinary services? _____

Paws and People Foster Agreement and Signature:

***I agree to abide by the policies and procedures of Paws and People, which includes all relevant zoning and animal control codes and ordinances, whether local, county or state. I understand that if I don't follow the guidelines, Paws and People can ask for my resignation as foster and remove foster animal(s) that are not being cared for under the agreement.**

*** I agree to be personally responsible for the humane care, appropriate food, containment, shelter, treatment, control and attention to behavior of the animal(s) in my care until adopted.**

*** I agree that at no time shall any animal(s) be transferred to any other rescue, shelter or home without the knowledge and approval of Paws and People. All Pets are the sole legal property of Paws and People. All foster to adopt pets are the sole legal property of Paws and People until the adoption is finalized.**

*** I agree that I will not hold Paws and People or any of its officers, members, directors or volunteers responsible for occurrences involving scratches, bites, property damage, people or animals that are damaging.**

*** I have completed an inspection with a Paws and People representative and agree to a yearly inspection.**

*** All foster animals will be fully vetted, spayed/neutered and have current vaccines, including rabies with information flyer pertaining to rabies shared. I agree to supporting this through transportation to veterinary services, keeping medical records on all services and medications given. (I have seen and understand the medications form). I agree to work with Paws and People designated Veterinarian unless otherwise determined.**

*** I agree to fully caring for the foster animal including appropriate food, water and shelter. I understand that animals may need baths and combing. Behavioral issues can be addressed through consultation with trainers as suggested by Paws and People representatives.**

*** I agree to keep all procedural records and an ongoing written disclosure of the foster animal's needs, physical wellness, behavioral adjustments and individual characteristics to be share openly with possible adopters. I will give a full copy of all records and disclosures to Paws and People once the adoption procedure is complete. I agree to have on-going communication with Paws and People while fostering an animal.**

***I agree to notify Paws and People immediately if I can no long foster.**

Signature of Foster applicant: _____ Date: _____

Signature of Paws and People representative: _____ Date: _____