



## Destiny for Dogs

326 Macy St.  
West Palm Beach, FL 33405

(561) 313-2005 cell  
(561) 582-2888 fax  
[www.destinyfordogs.com](http://www.destinyfordogs.com)  
[www.facebook.com/destinyfordogs](https://www.facebook.com/destinyfordogs)

### DOG PLACEMENT AGREEMENT

I HEREBY AGREE TO THE FOLLOWING TERMS AND CONDITIONS AS CONSIDERATION FOR Destiny for Dogs, Inc. TRANSFER TO ME

WHICH IS TO BE PLACED IN MY CUSTODY UPON THE SIGNING OF THIS AGREEMENT:

1. Dog will be an indoor house pet only. Dog will not be used as a guard or attack dog. Dog will not be tied or chained outside and will not allow others to do so.
2. I agree to provide daily proper food, shelter and medical care for the duration of his/her life.
3. I agree to provide the required yearly vaccines and medical treatments for the duration of his/her life: Rabies, 6 in 1, Bordatella and Heartworm testing and preventative medication.
4. I agree to provide monthly Heartworm and Flea treatments for the duration of his/her life.
5. If dog has not been spayed/neutered at the time of placement, arrangements must be made to have this done by (date) \_\_\_\_\_
6. I agree to hold Destiny for Dogs, Inc. harmless for any and all animal bites that may occur. Destiny for Dogs, Inc. will not be responsible for the animal once it leaves our possession and the Dog Placement Agreement has been signed. I will solely be responsible for the dog's actions while it is in my custody.
7. I hereby accept this described pet under the further term and condition that it cannot (by my authority) be sold and/or transferred without prior notification to and consent from Destiny for Dogs, Inc.
8. Destiny for Dogs, Inc. will reclaim the animal if it proves to be unsatisfactory for any reason.
9. I hereby agree to have a representative of Destiny for Dogs, Inc. phone and/or inspect my premises to determine that I am providing a good home for the pet. I agree to the remedy of specific performance (returning the animal) upon my breach of any portion of this entire agreement.
10. I agree that if any of the above terms and/or conditions are violated by me or members of my family, that Destiny for Dogs, Inc. has the right to reclaim the below described pet, and that I will freely return said animal upon notification of violation of this agreement. Should I refuse to release the animal after notification of violation of the agreement by Destiny for Dogs, Inc., I hereby agree to pay for court costs and reasonable attorney fees incurred by Destiny for Dogs, Inc. in reclaiming the animal plus medical costs necessitated by any neglect/abuse of said animal by me or my family.



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Custodian's Name: \_\_\_\_\_

Custodian's Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Phone #	Home #	Work#	Cell#
_____			

Employer's Name: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Spouse/Partner's Name: \_\_\_\_\_

Phone#:	Home #	Work#	Cell#
_____			

Spouse/Partner's Employer: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Do you live in a:  House  Apartment  Condo  Trailer  Other

Do you:  Rent  Own  Other \_\_\_\_\_

Are you:  single  married

How many children living with you \_\_\_\_\_

What are the ages of your children living with you? \_\_\_\_\_

Description of Dog:		<input type="checkbox"/> male <input type="checkbox"/> female
Breed of Dog:		Spayed/neutered <input type="checkbox"/> yes <input type="checkbox"/> no
Placement Representative:		

Adoption Donation:	
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\*\* This donation is non-refundable. Donation goes to help other rescued dogs and help cover some of the expenses incurred during the care of this dog.



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## Veterinary Records Information

Has Dog had rabies shot?  yes  no Date of Last Shot: \_\_\_\_\_

DHPPC: Date \_\_\_\_\_ FECAL: Date \_\_\_\_\_

ID Tag # \_\_\_\_\_

Heartworm Check: Date \_\_\_\_\_

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Print Name	Print Date	Signature
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