Long Beach Animal Care Services (LBACS)
Surrender Questionnaire

**PROFILE**

Pet’s name: _______________________ Age: _____ Weight: _____ Animal Type: __________________

Breed(s):____________________ Sex: □ Male □ Female. Is your pet altered (“fixed”) □ Yes □ No

If so, when and where was your pet altered? _________________________________________________

How long has this pet lived with you? _______________________________________________________

Where did you acquire your pet (check one):

- Gift
- Found as a stray
- Purchased online
- Friend/family was rehoming
- Adopted from a city or county “pound”
- Purchased in person from a professional breeder
- Adopted from a private non-profit rescue organization or humane society

Please provide the name of the agency/company:______________________________________________

Why are you surrendering your pet to the shelter (check all that apply)?

- Behavioral problems
- Time Commitment
- Family Issues
- Health Issues (your pets)
- Other: ________________________

Please explain in your own words why you need to relinquish your pet:

______________________________________________________________________________________

______________________________________________________________________________________

**PERSONALITY, BEHAVIOR AND HABITS**

Check all that apply to describe your pet’s personality:

- Friendly
- Shy
- Independent
- Fearful
- Playful
- Affectionate
- Stand-offish
- Aggressive
- Overly reactive

Describe your pet’s personality in your own words: ____________________________________________

______________________________________________________________________________________

How would you describe your pet’s behavior towards children?

- Loves kids and is gentle
- Tolerant
- Jumps on them
- Nervous
- Scared
- Does not like kids

If your pet does not live with children, how often does your pet interact with children?

*If your pet has issues with children, cats or dogs that include growling, showing teeth, hissing, scratching, snapping, please describe how many times and give as much detail as you can: ____________________________

Which behaviors does your pet need improvement on?

- Jumping
- Digging
- Barking
- Whining
- Begging
- Chewing
- Trash picking
- Counter surfing
- Other
Does your pet have accidents in the house? □ Yes □ No. If yes, how often (select all that apply)?

☐ Daily  ☐ Occasionally  ☐ defecate only
☐ Weekly  ☐ urine only  ☐ both

If your pet has accidents, where are the accidents usually located? _______________________________________

If your pet has accident only when left alone? □ Yes □ No

Does your pet destroy things in the house when left alone? □ Yes □ No. How often? □ 1-2 times per week  □ 1-2 times per month  □ Occasionally  □ Other _______________________________________

Has your pet ever lived with children? □ Yes □ No. If so, what ages? ________________________________

What is your pet afraid of? _______________________ Describe your pet’s reaction: __________________________

What is your pet sensitive to? ____________________ Describe your pet’s reaction: __________________________

What irritates your pet? ________________________ Describe your pet’s reaction: __________________________

When is your pet inside?

☐ In the day  ☐ When s/he chooses  ☐ Never
☐ At night  ☐ Always

How long each day is your pet left alone inside?

☐ less than 1 hr  ☐ 1-3 hrs  ☐ 3-8 hrs  ☐ 8+ hrs

Is your pet free to roam in the home or confined? □ Roam  □ Confined in ________________________________

Is your pet crate trained? □ Yes □ No  Do you still use the crate? □ Yes □ No

If you regularly (daily) use a crate to confine your pet, how many hours at a time is typical? ________

When is your pet outside?

☐ When home alone  ☐ When s/he chooses  ☐ When supervised

Do you have a fenced yard? □ Yes □ No. If not, do you have: □ a tie-out  □ electric fence  □ other

How long is your pet left in your yard each day?

☐ less than 1 hr  ☐ 1-3 hrs  ☐ 3-8 hrs  ☐ 8+ hrs

How do you exercise your pet?

☐ Let out to play in yard  ☐ Go for leash walks  ☐ Play inside

How often is your pet exercised and for how long? __________________________________________________

How does your pet walk on the leash? □ Well □ Pulls □ Does not walk on leash

Is your pet’s behavior different when on leash compared to when off leash when seeing another dog?

☐ No
☐ Yes. If so, how? _________________________________________________________________

What kind of collar do you use when on a walk?

☐ Buckle  ☐ Pinch  ☐ Other: _____________
☐ Body harness  ☐ Shock collar
☐ Head halter  ☐ Choke chain

What kind of training have you tried?

☐ Choke chain  ☐ Treats  ☐ Clicker
☐ Electric shock  ☐ Praise  ☐ Other: ___________

What behaviors does your pet know?

☐ Sit  ☐ Shake
☐ Down  ☐ Roll over
☐ Stay  ☐ Other
☐ Come
**WHAT DOES YOUR PET DO WHEN?**

<table>
<thead>
<tr>
<th>Behavior</th>
<th>JUMP or CHASE</th>
<th>GROWL or HISS</th>
<th>SNAP or SWAT</th>
<th>BITE</th>
<th>AVOID</th>
<th>HIDE</th>
<th>CALM</th>
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</thead>
<tbody>
<tr>
<td>Mail carrier/delivery person comes to front door</td>
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<td>Stranger/visitor knocks on front door</td>
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<td>Stranger/visitor comes into the house</td>
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<td>Visitor tries to pet your pet inside the house</td>
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<td>Stranger approaches you while on a walk</td>
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<td>Stranger attempts to pet your pet while on leash with you</td>
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<td>Stranger walks past the care while your pet is inside it</td>
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<td>People walk past home while pet is in front yard</td>
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<td>You or someone goes near food bowl while pet is eating</td>
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<td>You or someone tries to take away toy or treat from pet</td>
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<td>You or someone tells pet to get off the couch</td>
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<td>You or someone touches your pet while sleeping</td>
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<td>You or someone gives your pet a hug</td>
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<td>You or someone bathes or grooms your pet</td>
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<td>You or someone scold or reprimand your pet</td>
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<td>Approached in a friendly way by a larger dog</td>
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<td>Approached in a friendly way by a smaller dog</td>
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<td>Approached in a friendly way by a dog your pet’s size</td>
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<td>Approached in a friendly manner by a cat</td>
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<td>A child cries or screams</td>
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<td>A child runs toward your pet</td>
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<td>A child tries to give your pet a hug</td>
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<td>A child tries to pick up your pet</td>
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<td>A child runs past your pet</td>
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<td>A child or someone rides a bike past your pet</td>
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<td>A child is picked up by you in front of your pet</td>
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<td>Your pet, while inside, sees an outdoor cat</td>
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<td>Your pet, while inside, sees a dog</td>
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<td>Your pet, while inside, sees a small animal like a squirrel</td>
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Please check the behaviors your pet has ever displayed. Tell us the last time, and circumstances for each:

- **Snarled**: □ once/rarely □ occasionally □ regularly. Last time: ________________________  
  Circumstances:____________________________________________________________________  
  ______________________________________________________________________________

- **Growled**: □ once/rarely □ occasionally □ regularly. Last time: ________________________  
  Circumstances:____________________________________________________________________  
  ______________________________________________________________________________

- **Snapped (bite attempt)**: □ once/rarely □ occasionally □ regularly. Last time: __________  
  Circumstances:____________________________________________________________________  
  ______________________________________________________________________________

- **Nipped (bite, no broken skin)**: □ once/rarely □ occasionally □ regularly. Last time: __________  
  Circumstances:____________________________________________________________________  
  ______________________________________________________________________________

- **Bit AND broke skin**: □ once/rarely □ occasionally □ regularly. Last time: __________  
  Circumstances:____________________________________________________________________  
  ______________________________________________________________________________
Has your pet ever fought with another dog? □ No  □ Yes. If so, How long ago? ________________
Describe the incident. Was the other dog injured? □ No  □ Yes. Was the other dog killed or otherwise not survive? □ No  □ Yes. Describe the incident: ____________________________________________________________

Has your pet ever killed a prey animal such as a rabbit, bird, squirrel, mouse, rat, etc.? □ No  □ Yes. If so, describe the incident:

CATS ONLY

What type of litterbox and litter does your cat prefer (check all that apply)?:

☐ Covered  ☐ Outdoor  ☐ Sand  ☐ Other: _____
☐ Uncovered  ☐ Pellets  ☐ Dirt

How many litter boxes do you have? ________ Where are they located? ___________________________

Thank you for giving your pet their best chance and entrusting us with them. Please complete the veterinary history form. Please tell us anything else you would like us to know about your pet.