

## **Home Visit Report**

Adopter's Name: Appointment Date:
Address:Address: Phone:
Address:Address:Phone: SRC Volunteer:Potential rescue adoption:
you feel uncomfortable after making the appointment, take someone with you or check their personal references first!
General Impressions Type of street: Busy Quiet Setting: Urban Suburban Rule Vhat is the exterior appearance: Neat Unkept Interior: Excellent Good Fair Poor How many people live here: Adults Children How did they get interested in schnauzers:
Safety Check Is there a back yard: yes no Fenced: yes no Type:  Is there a chain tie outside: yes no  Walk fence see if any escape risk exists under or over the fence.)  Tour home, garage and property - is it dog proof even for young pups: yes no  hazardous items, exposed power cords, poisonous plants, cleaning products, garage fluids, painting supplies, etc.)  Where will dog relieve itself:  How get exercise:  Where when left alone:  Will dog have free run of the house: yes no Explain:  Dog allowed on furniture: yes no If children, did you observe them with animals: yes no
Comments:
Current pets Neglected/Abused: yes no  Type Name Sex Cared for: yes no Good w/other animals: yes no
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low do family members react to each other:
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s the adopter physically able to care for pet: yes no
f the dog has behavioral problems, how would they handle it:
dog becomes ill, could they financially afford it: yes no
Villing to house-train: yes no Willing to attend obedience school: yes no
Oo they have any other concerns about a rescue dog:
Vould you adopt to them: Absolutely With conditions Definitely not