

## SOUTHERN ARIZONA GOLDEN RETRIEVER RESCUE REPORT OF HOME VISIT TO POTENTIAL FOSTER/ADOPTER

Revised July 25, 2013

This home visit report is for both potential fosters and potential adopters. Please fill out the form completely with all pertinent information, then send it in. (See the submission instructions on the last page.)

There is room for comments in all sections, and the better you can describe the home and family, the better match SAGRR can make for just the right Golden for this family. Keep in mind that the Placement team does not know this family or anything about them except what you provide in this report, so you are their eyes and ears to help them "see" the adoption family via this report.

| EVALUATOR AND APPLICANT INFORMATION  |        |                          |         |            |              |                 |         |           |                |
|--|--------|--------------------------|---------|------------|--------------|-----------------|---------|-----------|----------------|
| Date of Visit 6/6/2  | 014    | _EVALUATOR Jane          | Hodgs   | on         |              | PHONE 520-2     | 297-270 | EMAIL Ja  | nehunterhodgso |
| Address Visited  | 1171   | N Calamondin Pl          | City, Z | IP Oro Va  | alley        | _ Cross Streets | Naranj  | a & La Ca | nada           |
| Explain what a fos   | ter fa | ımily does.              |         |            |              |                 |         |           |                |
| FAMILY INTERESTED IN FOSTER ONLY ADOPT ONLY FOSTER AND ADOPT   |        |                          |         |            |              |                 |         |           |                |
| HOMEOWNER STATUS OWNS HOME RENTS OR LEASES HOME  |        |                          |         |            |              |                 |         |           |                |
| If the family rents or leases home, obtain copy of Landlord approval for large breed dog; family will not be approved until this document has been received.                           |        |                          |         |            |              |                 |         |           |                |
| APPLICANT John   | n (Jac | k) Lyons                 |         |            | <b>EMAIL</b> | JMLyonsDen@     | comcas  | st.net    |                |
| PHONES: HOME 520-544-2442 WORK   |        |                          | [       |            |              | CELL            | 520-349 | -4200     |                |
| OCCUPATION/EM  | PLOYE  | Retired dentist          |         |            |              |                 |         |           |                |
| CO-APPLICANT   | Mart   | ha Lyons                 |         |            | EMAIL        | JMLyonsDen@     | comcas  | st.net    |                |
| PHONES: HOME   | 520-   | 520-744-2442 <b>WORK</b> |         | <u> </u>   |              |                 | CELL    |           | -2442          |
| OCCUPATION/EM  | PLOYE  | ER                       |         |            |              |                 |         |           |                |
| LIST ALL NON-APPLICANT HOUSEHOLD MEMBERS, RELATIONSHIP TO APPLICANT, AND AGES OF MINORS (Relationship types are Spouse/Partner, Child (including grandchild), and Non-applicant Adult) |        |                          |         |            |              |                 |         |           |                |
| Name   |        |                          |         | Relationsh | ip           |                 |         |           | Age, if minor  |
|  | N      | lone                     |         |            |              |                 |         |           |                |
|  |        |                          |         |            |              |                 |         |           |                |
|  |        |                          |         |            |              |                 |         |           |                |
|  |        |                          |         |            |              |                 |         |           |                |
|  |        |                          |         |            |              |                 |         |           |                |
|  |        |                          |         |            |              |                 |         |           |                |
|  |        |                          |         |            |              |                 |         |           |                |

| EXTERIOR OF PROPERTY                      |   |  |  |
|---|---|--|--|
| TYPE OF DWELLING:                         | Single-family Home Duplex Condo or Townhouse  |  |  |
|   | Mobile or Manufactured Home Apartment   |  |  |
| DESCRIBE SURROUNDING                      | <b>S</b> (e.g., is home in subdivision, country, on golf course, isolated, etc.)  |  |  |
| Beautifully landscaped, we                | ell maintained home high on hill overlooking Tucson   |  |  |
|   |   |  |  |
| <b>EXTERIOR</b> : Is the exterior         | of the home and the landscape generally well-maintained)?   |  |  |
|   | Yes No Somewhat   |  |  |
| Is the yard reasonably cleato the Golden? | or of feces, trash or other objects (and hazardous plants) that might present a health problem  Yes No                                    |  |  |
| Is there a fenced yard?                   | Yes No  |  |  |
| FENCE: What type of fenc                  | ${\sf Block}$ Height: ${\sf block}$ Height: ${\sf block}$ ft. If there are varying heights, provide the lowest height                     |  |  |
| Type of gate: sel                         | f-latching  |  |  |
| If neither, explain                       |   |  |  |
| Are there any apparen                     | t holes or gaps in the fencing? Yes No  |  |  |
| If the yard is not fenced, d              | escribe the surrounding area adjacent to the yard:  |  |  |
| Totally fenced                            |   |  |  |
| Will the dog always be sup                | pervised or on-leash in the unfenced yard?  |  |  |
|   | grass, rock, dirt, natural desert, etc.)  |  |  |
| Pavement, grass, planters                 | s, rocks  |  |  |
| POOL Is there a pool?                     | ■ Yes   |  |  |
| Is it fenced?                             | ☐ Yes ■ No  |  |  |
| Is there a spa?                           | ☐ Yes ■ No  |  |  |
|   | a puppy, verify if the puppy could get through the fencing and if so, is applicant willing to put afety measure to safeguard small puppy? |  |  |
| If pool or spa is unfenced,               | advise Applicant it is hard to keep some Goldens out of the water, and note their reaction.   |  |  |
| Comments on the exterior                  | or landscaping:   |  |  |
| Not requesting puppy, und                 | derstand some dogs may be hard to get out of water.   |  |  |
|   |   |  |  |
|   |   |  |  |
|   |   |  |  |

| INTERIOR HOME ENVIRONMENT  |                |                                 |  |  |  |
|--|----------------|---------------------------------|--|--|--|
| Is the home generally well maintained?   | Yes            | ☐ No                            |  |  |  |
| Is the home generally clean and free of debris or clutter?   | Yes            | ☐ No                            |  |  |  |
| Are there stairs inside or leading into or outside the hom  This may impact an older dog or one with mobility is         | <del></del>    | ■ No                            |  |  |  |
| Describe the flooring (i.e., slick tile, carpet, hardwood, et  | c.) Tile, area | rugs, carpet in bedrooms        |  |  |  |
| Is the kitchen or bath trash uncovered?  | ☐ Yes          | ■ No                            |  |  |  |
| Are any toilet lids open?  | Yes            | ■ No                            |  |  |  |
| Is there a dog door of sufficient size for a large golden?   | Yes            | ☐ No                            |  |  |  |
| If not, are there any plans to install a dog door?   | Yes            | ■ No                            |  |  |  |
| Look for any plants, fragile items at Golden tail level, shoes, toys, etc. that may be an issue and discuss with family. |                |                                 |  |  |  |
| While the family is home, where in the home will the Gol   | lden be allowe | Everywhere                      |  |  |  |
| Where will the Golden sleep? Bench at end of bed   |                |                                 |  |  |  |
| Will the Golden be allowed on furniture, beds?   | ☐ Yes          | ■ No                            |  |  |  |
| When the family is gone, where will the Golden be?   | verywhere unle | ess needs restriction as needed |  |  |  |
| Does the family use a crate?   | ■ Yes          | ☐ No                            |  |  |  |
| If so, for what purposes / when / how long will the Golden be in the crate? Only if absolutely needs                     |                |                                 |  |  |  |
| If not, what is the applicant's view on crating? Generally not, but have a crate if needed                               |                |                                 |  |  |  |
| Are they willing to use other ways of containing a dog (e.g., baby gates) if they do not want to crate train?            |                |                                 |  |  |  |
|  | Yes            | ☐ No                            |  |  |  |
| Comments on Interior   |                |                                 |  |  |  |
| Golden allowed on one end of one couch. Will prop door open with rock to go to back patio.                               |                |                                 |  |  |  |
| In car have special halter & restraining "seat belt" & grate separating front & back seats for use if needed             |                |                                 |  |  |  |
|  |                |                                 |  |  |  |
|  |                |                                 |  |  |  |
|  |                |                                 |  |  |  |
|  |                |                                 |  |  |  |
|  |                |                                 |  |  |  |
|  |                |                                 |  |  |  |

## PET CARE AND INTERACTIONS Who will be the primary care giver? Both How long will the Golden be left alone on a typical day? 4 Discuss that we do not allow dogs to be left outside when no one is home, or all day. Yes ■ No Are there any other dogs in this home? Describe all dogs, listing breed, age, sex, and any specific information that might affect a SAGRR Golden: None Are any of the resident dogs unaltered? If so, explain below Yes ■ No ■ No Are there any cats in the home? Yes If yes, list age and gender of each: Is family aware that cat food and litter box should be kept out of the Golden's reach? ■ Yes No Are the cats used to dogs? Yes Are there any other pets? Yes If yes, please explain what type and where they are kept None Are there any livestock? Yes ■ No Are there any dogs that visit on a frequent basis? Yes Did you take a Golden with you on this visit? Yes How did the family interact with your Golden? Very good friendly affectionate interaction How did the resident dogs/cats interact with your Golden? None How did the family interact with the resident dogs/cats? None Yes No If yes, explain their interaction with your dog or the resident dog(s): Are there children in the home? \_Where will the water bowl be located? Kitchen Where will the dog eat? Kitchen Costco weight management What food will the family feed the Golden? Please discuss quality food and leave the "How to rate your dog's food" handout with them if appropriate. Explain that if there will be more than one dog, we recommend feeding them separately, at least for the first few weeks. How did they react to this recommendation? Seem open Please list all the ways the family will exercise the Golden. Run dog on golf course, walk on trail, dog park Additional comments on Pet Care and Interactions: Seem very competent dog owners

| THE GOLDEN FOR YOU  |            |            |             |         |  |
|---|------------|------------|-------------|---------|--|
| Has the family owned a Golden previously?   | s 🔲 N      | lo         |             |         |  |
| Do they understand that many Goldens are velcro-type dogs and want to be where their people are?   Yes  No  |            |            |             |         |  |
| Do they understand the shedding of Goldens and need for frequent brushing and grooming, vacuuming and sweeping?   |            |            |             |         |  |
| ■ Yes □ No  |            |            |             |         |  |
| What type of Golden does the family prefer?   |            |            |             |         |  |
|   |            |            |             |         |  |
| AGE RANGE PREFERRED 3-7   |            |            |             |         |  |
| What are their expectations for the SAGRR Golden?   |            |            |             |         |  |
| ■ COMPANION   | <b>■</b> ⊦ | IIKING     | SWIMMING    | AGILITY |  |
| ☐ CHILD'S COMPANION ☐ OBEDIENCE or RAL  | LY 🔲 T     | HERAPY DOG | SERVICE DOG |         |  |
| ☐ DOG'S COMPANION ☐ OTHER (explain)   |            |            |             |         |  |
| What Activity Level? Open to high energy  |            |            |             |         |  |
| Would the family consider a bonded pair?  | Yes        | ■ No       | Maybe       |         |  |
| Is the family willing to adopt a Golden with these condi  | itions?    |            |             |         |  |
| minor health problems?  |            |            |             |         |  |
| (mild valley fever, thyroid, allergies, arthritis etc.)   | ■ Yes      | ☐ No       | ☐ Maybe     |         |  |
| major health issues?  | Yes        | ☐ No       | Maybe       |         |  |
| special needs that are treatable?   | Yes        | ☐ No       | ☐ Maybe     |         |  |
| cancer?   | Yes        | ■ No       | ☐ Maybe     |         |  |
| not house trained?  | Yes        | ☐ No       | Maybe       |         |  |
| Comments on The Golden for You:   |            |            |             |         |  |
| Their golden died abt 2 months ago. If they cannot find a dog here they will look in Park City, Utah where they go for the summer.  |            |            |             |         |  |
|   |            |            |             |         |  |
|   |            |            |             |         |  |
|   |            |            |             |         |  |
| TRAINING FOR YOUR GOLDEN  |            |            |             |         |  |
| Please discuss that it is always advisable to take any age Golden to training/CGC/obedience classes as part of the bonding experience. Also, advise family that some Goldens really need training for a successful placement. |            |            |             |         |  |
| If SAGRR recommends training, is the family willing to use a trainer we recommend?    Yes    No   |            |            |             |         |  |
| Is the family willing to crate train if recommended by SAGRR?   |            |            |             |         |  |
| Does the family understand that there is an adjustment period for most dogs, and it will be a few weeks or longer for the dog to settle into their home?  Yes No  |            |            |             |         |  |

| FEE STRUCTURE FOR YOUR PERFECT GOLDEN  |   |  |  |  |  |
|--|---|--|--|--|--|
| Did you review the fee structure with the family and explain that they will be paying the adoption fee, at the time the dog is delivered to them?    Yes   No  |   |  |  |  |  |
| \$300 O-UP TO 3 YEARS OLD  |   |  |  |  |  |
| \$250 3- UP TO 8 YEARS OLD   |   |  |  |  |  |
| \$150 OVER 8 YEARS OLD   |   |  |  |  |  |
| Let the family know that fees for special needs dogs are determined on a case by case basis.   |   |  |  |  |  |
| If family is interested in a pair, did you explain pair pricing (second dog is 1/2 price)?   Yes  No   |   |  |  |  |  |
| MISCELLANEOUS  |   |  |  |  |  |
| List any persons in the home with special needs that should<br>be considered when placing a Golden in this home.   | None  |  |  |  |  |
| Does the age and activity level of the dog requested appear a  | appropriate for the family? 🔳 Yes 🗌 No                |  |  |  |  |
| If not, what age and activity level dog would you recommend for this family?  As they like fine  |   |  |  |  |  |
| Did you advise them of your recommendation for a different age/activity level dog?  Please list any physical limitations that should be considered when placing a Golden in this home (e.g., the applicant weighs 80 pounds and would not be able to control a 100-pound untrained Golden)  None |   |  |  |  |  |
| Does the family have a vehicle appropriate for a Golden?  Yes   No   |   |  |  |  |  |
| Please discuss and leave a copy of "What's Next."  |   |  |  |  |  |
| SUMMARY  |   |  |  |  |  |
| DO YOU RECOMMEND THAT SAGRR APPROVE THIS HOME?   | Yes No  |  |  |  |  |
| WOULD YOU LEAVE YOUR DOG IN THIS HOME?   | Yes No  |  |  |  |  |
| If you answered NO to either of the above, you must comment below.   |   |  |  |  |  |
| COMMENTS ON TRAINING, FEES, MISCELLANEOUS, OR IN GENERAL:  |   |  |  |  |  |
| Very good home for a SAGRR dog. This couple would be a gactive.  | great asset to our SAGRR family. They golf & are very |  |  |  |  |

## **SAVE AND SUBMIT YOUR REPORT**

IMPORTANT: Please save the completed form as a PDF on your computer for your records and as a backup.

In most cases you can simply **click the button below**. This will open an email addressed to <u>GHET@sagrr.org</u> with this form already attached. Please include a brief summary in the body of the email so Placement can quickly ascertain if this family is a possibility for a given dog. Then just send the email.

## **Submit Report to SAGRR**

If this does not work for you, compose an email to <a href="mailto:GHET@sagrr.org">GHET@sagrr.org</a>, attach your saved copy of this form, and send.

SAGRR Home Visit Evaluation Form, last revised 7/25/2013

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