



Pet Adoption Agreement

StrayPawsPR & Gatos Borincoon

Current Owner's¹ Name Juana Martinez
ADDRESS 124 Calle Vives
CITY Ponce, Puerto Rico ZIP CODE 00730 PHONE _____
CAT Name Lilly BREED DSH SEX Female Spay/Neutered Yes
DOB May 3, 2023 COLOR White & Gray Distinguishing marks Lynx Colorpoint



I, Michelle Buss Majchrowicz, hereafter referred to as the adopter², hereby agree that the above described animal is being adopted by me solely as a pet for myself and/or my immediate family. I agree that I will not sell, give away or otherwise dispose of said animal to any person(s), dealer, retailer, auction, institute or any other entity for any reason.

If at a later date I am unable or unwilling to keep this pet, I agree to first contact the above-described current owner¹ and /or Adoption witness to give them the option to reclaim said pet at no charge. I hereby agree to care for the above-described pet in a humane and responsible manner and to provide it with clean and adequate shelter, food, water and veterinary care and provide updates with pictures of the adopted pet to current owner¹ from time to time in good faith.

I hereby understand and agree that the current owner¹ makes no representations or warranties, expressed or implied, about the above-mentioned animal's temperament and is hereby absolved from any liability for future damages or injuries caused by said animal. I also understand and agree that the current owner¹ further gives no guarantees, expressed or implied, of the suitability of the animal to the adopter and/or his family. 02367

Adopter's² Name Michelle Buss Majchrowicz
ADDRESS 18 sheffield park EMAIL majfamily@comcast.net
CITY Plympton STATE MA ZIP CODE 02367 PHONE 781-291-9173

I certify that all statements made by me on this adoption agreement are true and correct. I agree that the current owner¹ has the right to confiscate the above-described animal in the event that any statements made by me are found to be false.

ADOPTER'S SIGNATURE  DATE: 6/30/24
WITNESS SIGNATURE  DATE: 6/30/2024

¹ Current owner is defined here as the person who originally held the above-described animal in their possession.

² Adopter is defined here as the person who accepts for adoption the above-described animal.

Placement Questionnaire:

Have you had pets in the past? Yes What happened to them? Current

How many hours would the pet be alone during the day? 0

Will your cat be allowed outdoors? No If yes, how busy is your street? _____

Will you be getting a collar and tag for him or her? Yes

(We recommend it, even for indoor-only cats, there's a chance they might get out).

What arrangements will you make when you go away? Family takes care of them

How often are you away? 2x a year

Anything else you'd like us to know about you? We are animal lovers

What appealed to you about this particular pet? Helping a cat have a forever home and great spoiled life

Why are you interested in adopting now? Yes

References-Please provide information of a veterinarian you have used or will use.

References are checked.

Clinic Name: Halifax veterinary services Clinic Phone: 781-294-8155

Vet records are under the name of: John majchrowicz

Personal reference who has seen you around animals: Jennifer critz

Phone number: 7812541562

This is a no-fee pet adoption. We suggest and encourage a donation for rescuers and volunteers that help save animals in need in Puerto Rico.

Donations are voluntary and suggested to be given directly by you to Puerto Rico rescue efforts and vet care provided by rescuers. Suggested entities:

[#StrayPawsPR](#)

[TNR_PUERTO_RICO](#)

[SAVEAGATO](#)

[FlightAngels^R](#)

We thank you! for helping raise awareness and sharing your experience with others.