



CIRCLE F

SITE VISIT CHECK LIST

ADOPTER INFORMATION

Name: _____ Phone: _____
 Address: _____
 City: _____ Province _____ Postal Code: _____
 Email Address: _____

FACILITY INFORMATION (If different from above)

Name of Facility Owner: _____ Phone: _____
 Address: _____
 City: _____ Province: _____ Postal Code: _____

Site visit done by: _____ Date: _____

Follow-up visit needed: Y _____ N _____ Approximate Date: _____

Other livestock (horses, pets, etc): _____

Pasture Approximate size of total pasture/grazing land: _____

Fencing type: _____

Protection from elements available: Y _____ N _____

Safety of enclosures: _____

Shelter Barn _____ Stalls _____ Lean-to _____ Other _____

Condition of shelter: _____

Paddocks Y _____ N _____ Size: _____

* Fencing type: _____

Feed and Hay Storage/Shelter Y _____ N _____ Type: _____

Water Supply Well _____ City _____ Creek _____ Other _____

Water dispensers available in all areas horses kept: Y _____ N _____

Safe and clean water dispensers: Y _____ N _____

Other Comments:

* Fencing: BW = Barbed Wire FW = Farm Wire P+R = Post and Rail E = Electric