

Pet Screening Q. 2017

1. what is your name?
2. What is the name of puppy yr. Interested in?
3. Are there any handicapped / special needs? Please explain.
Any doctors order's? Weight limit?
4. If tcup...have any tcup experience ?
5. Do you have any experience w/ this breed or others?
6. Can you provide any vet contact info - you will be using...or will be using?
7. Is this your 1st puppy?
8. Are you 18 yrs. Or over?
9. Do you have kids? If so, What are the age's ?
10. Any other pets in the home.?
11. What are the plans for puppy during day?
12. Do you agree w/ spay/neuter? Heartworm?
13. Are Pets allowed where u live?
14. Did you get a chance to read our website
"pup health care" pg.?
15. Where are you located?

All answers are true and will be honored to the best of my ability _____
(Your Initials)

- *Note: A. Please forward a copy via email, fax, or post. Or answers can be discussed over phone. Please leave your phone # and the best time to call. Pet Screening Questions only take 10 min. or so.
Pending Answer's we can take the next step with a scheduled "meet n greet" app.
- B. All information provided here is private and used for Our records For Puppy/Dog related purpose's only.