

PUPPY APPLICATION

FULL NAME OF ALL ADULTS IN THE HOUSEHOLD				
FULL ADDRESS INCLUDING POSTCODE <i>(please submit proof of address with application).</i>				
HOME TELEPHONE NUMBER				
WORK TELEPHONE NUMBER				
MOBILE TELEPHONE NUMBER				
E-MAIL ADDRESS				
BREED				
PREFERRED COLOUR				
PREFERRED SEX OF PUPPY <i>(those without preference may have priority).</i>	MALE	FEMALE	DON'T MIND	
IF YOU HAVE EXPRESSED A PREFERENCE FOR EITHER SEX, CAN YOU EXPLAIN WHY?				
WHEN ARE YOU LOOKING TO WELCOME A PUPPY INTO YOUR HOME?	ASAP	THE NEXT 6 MONTHS	2022	2023
HAVE YOU OWNED A DOG BEFORE/WHAT DOG EXPERIENCE DO YOU HAVE?				
DO YOU OWN ANY OTHER DOGS OR CATS? <i>(please give details)</i>				
WHAT KIND OF HOUSE DO YOU LIVE IN?				
DO YOU OWN YOUR OWN HOUSE? <i>(if not evidence of permission to own a dog will be required).</i>	OWNED	RENTED	LIVING WITH FAMILY	OTHER <i>(please explain below)</i>
PLEASE EXPLAIN YOUR HOUSING CIRCUMSTANCES IF NOT CLEAR FROM ABOVE.				
HOW MANY OTHER ADULTS LIVE IN YOUR HOUSE? <i>(please indicate if they are grown up children)</i>				



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WHAT MADE YOU CHOOSE THIS BREED?					
WHY HAVE YOU DECIDED TO GET A DOG/PUPPY NOW.					
WHAT SIZE IS YOUR GARDEN AND IS IT FULLY SECURED?					
WHAT IS YOUR OCCUPATION?					
WHAT HOURS ARE YOU AWAY FROM THE HOME NORMALLY?	Work from home	1-2 Hours per Day	3-4 Hours per Day	9 am - 5pm	In excess of these
IF YOU ARE CURRENTLY WORKING FROM HOME, HOW LONG HAVE YOU BEEN DOING SO?					
WILL YOUR WORKING HOURS AND WORK LOCATION CHANGE IN THE NEXT YEAR?	YES		NO		
WHAT IS YOUR PARTNERS OCCUPATION?					
WHAT HOURS ARE THEY AWAY FROM THE HOME NORMALLY? (tick as appropriate)	Work from home	1-2 Hours per Day	3-4 Hours per Day	9 am - 5pm	In excess
IF YOUR PARTNER IS CURRENTLY WORKING FROM HOME, HOW LONG HAVE THEY BEEN DOING SO?					
WILL YOUR WORKING HOURS AND WORK LOCATION CHANGE OVER THE NEXT YEAR?	YES		NO		
WHAT ARRANGEMENTS WILL BE MADE FOR YOUR PUPPY WHEN NO ONE IS HOME?	DOG SITTER VISIT	TAKEN TO FAMILY/FRIENDS	CRATED	PUPPY DAY CARE	OTHER (please state below)
OTHER ARRANGEMENTS (please state any provisions for the puppy that aren't shown above when no one is home)					
HOW MANY HOURS DO YOU CONSIDER IT OK FOR A PUPPY TO BE LEFT ALONE?	NEVER	30 MINS MAX	30-60 MINS	1-2 HOURS	OVER 2 HOURS
HOW MANY HOURS DO YOU CONSIDER IT OK FOR A DOG TO BE LEFT ALONE?	NEVER	30 MINS MAX	1-2 HOURS	3-4 HOURS	OVER 4 HOURS
WHAT IS YOUR NORMAL WEEKDAY ROUTINE? (please list any regular sporting/educational/hobby or similar activities).					



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WHAT IS YOUR NORMAL WEEKEND ROUTINE? (please list any regular sporting/educational/hobby or similar activities).					
DO YOU OR ANY MEMBER OF THE FAMILY LIVING AT THE ADDRESS SUFFER ALLERGIES TO PET HAIR? IF NOT, PROPER EXPOSURE SHOULD BE UNDERTAKEN BEFORE PURCHASE OF A PUPPY.					
WILL YOU BE GETTING INSURANCE FOR YOUR PUPPY?	YES (lifetime)	YES (standard)	VET PROGRAM	NO	
WHAT LEVEL OF INSURANCE WOULD YOU BE PURCHASING FOR YOUR PUP?	£4k or less	£4-£6k	£7-10k	£10k or more	
WILL YOU BE CONTINUING WITH MY RECOMMENDED FOOD? IF NOT, WHAT ARE YOUR PREFERENCES? (please delete as appropriate).	BREEDER FOOD	RAW	KIBBLE	WET	OTHER (please specify)
PREFERRED BRAND OF FOOD IF YOU HAVE ONE? (if applicable)					
WHAT PUPPY TRAINING WILL YOU BE UNDERTAKING?	PUPPY SOCIALISATION	PUPPY TRAINING	GUNDOG TRAINING	OTHER (give details)	NO TRAINING
OTHER TRAINING (give details)					
WILL YOU BE VACCINATING YOUR PUPPY AND WHAT FOR?	No Vaccinations	Parvo, Distemper, Hepatitis	Leptospirosis	Kennel Cough	ALL
ARE YOU FAMILIAR WITH THE CONDITIONS THAT THIS BREED IS PRONE TO?					
SHOULD YOU BE UNABLE TO KEEP THIS PUPPY, DO YOU AGREE TO RETURN IT TO ME FOR REHOMING?	YES		NO		
HAVE YOU EVER HAD TO REHOME A PET? IF SO, WHAT WERE THE CIRCUMSTANCES?					
RE YOU HAPPY TO SIGN A SALES CONTRACT? (a copy will be provided in advance of collection for approval)	YES		NO		
WILL YOU BE NEUTERING YOUR PUPPY AT SOME POINT IN THE FUTURE?	YES		NO		
WILL YOU BE USING A CRATE? (tick all appropriate).	NIGHT ONLY	DAYTIME NAPS	WHILE YOU ARE OUT	ALL THREE	
WILL YOU BE USING A HARNESS?	YES		NO		



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DO YOU HAVE ACCESS TO GOOD OFF-LEAD AREAS (please give details)?								
ARE YOU AWARE OF THE GROOMING REQUIREMENTS OF THIS BREED?								
IS EVERYONE IN YOUR HOUSE AGREED TO THE PURCHASE OF A PUPPY?								
HOW MUCH PER MONTH DO YOU THINK IT WILL COST TO KEEP THIS PUPPY IN THE COMFORT THEY DESERVE?	£10-£30	£31-£50	£51-£70	£71-£90	£91-£110	£111-£130	£131-£150	In Excess of £150
<p>Please note that this puppy would be sold to you fully endorsed and barred from breeding. Breeding will only be permitted after all the necessary health and DNA checks have taken place first and evidence provided to the breeder. In addition, evidence of a breeding license will also be required, or evidence in writing that your council do not require on. The puppy will also come barred from exportation. Should you require any additional information regarding the required health tests, please contact the breeder directly. Please place a signature in the box to indicate your acknowledgement of the above.</p>							<p>..... I am signing to acknowledge my understanding of endorsements and that any puppy I purchase will be endorsed.</p>	
VET PRACTITIONER NAME, ADDRESS AND TELEPHONE NUMBER?								
PLEASE CAN YOU TELL ME A LITTLE ABOUT YOURSELF AND YOUR FAMILY AND WHY YOU THINK YOUR HOME WOULD BE THE BEST PLACE FOR ONE OF MY PUPPIES?								
SPECIAL NOTES								
<ul style="list-style-type: none"> I understand that while I have been quoted a price for a puppy, that this price might change at any time up to the time a reservation/holding fee being paid. 								
<ul style="list-style-type: none"> I understand that acceptance onto a waiting list does not give any guarantees of a puppy and that the breeder reserves the right to remove any person from a waiting list at any time. 								
SIGNED								
PRINT NAME								
DATED								
<p>Your GDPR privacy..... YOUR DETAILS WILL NOT BE SHARED OR SOLD. YOUR CONTACT DETAILS WILL ONLY BE USED FOR NORMAL ENQUIRY PURPOSES AND POTENTIALLY FOR PUPPY CONTACT PURPOSES FROM THE KENNEL CLUB, A MICROCHIP DATABASE COMPANY AND AN INSURANCE COMPANY FOR THE PURPOSES OF FREE INSURANCE.</p>								



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FOR OFFICE PURPOSES ONLY			
DATE APPLICATION RECEIVED:		DATE OF ASSESSMENT:	
DATE ACCEPTED ONTO LIST:		LITTER ACCEPTED ONTO:	
SEX OF PUP REQUIRED:		DATE PUPPY OFFERED:	
DEPOSIT PAID:		FINAL PAYMENT RECEIVED:	
COLLAR COLOUR OF PUPPY:		SEX OF PUPPY OFFERED:	
KC REG NUMBER:		KC REG NAME:	
PUPPY VISIT DATES:	1)	2)	3)
MICROCHIP NO:		DATE OF MICROCHIPPING:	
VET VISIT DATES:		DATE OF VET CHECK:	
ANY ABNORMALITIES:			
1ST VACCINATION DATE:		CONTRACT SENT FOR REVIEW:	
SIGNED CONTRACT RECEIVED:		MICROCHIP TRANSFER COMPLETED:	
PUPPY COLLECTION DATE:		TIME OF COLLECTION	
DISCOUNT OFFERED:		PET NAME OF PUPPY	
SPECIAL NOTES:			