

**To use this application, please highlight the entire application, copy, and paste it into your email program, or fill it out, save it and send it as a Word document attachment. . You can fill it out by moving with your mouse or arrow keys.**

**Please send the application to: caritahavanese@gmail.com**

**Application for Purchase of a Carita Havanese puppy**

Date applied \_\_\_\_\_

Applicant(s) 1. \_\_\_\_\_

2. \_\_\_\_\_

Home Phone Area Code/Number: \_\_\_\_\_

Work Phone Area Code/Number: \_\_\_\_\_ (Whose? \_\_\_\_\_)

Street address

\_\_\_\_\_

City/State/ZIP \_\_\_\_\_

E-mail \_\_\_\_\_

Employer \_\_\_\_\_

Number of adults in the household \_\_\_\_\_ Age range \_\_\_\_\_

Number of children \_\_\_\_\_ Ages \_\_\_\_\_

Do children frequently visit? \_\_\_\_\_

Do you have a fenced yard \_\_\_\_\_ Type/height of fence \_\_\_\_\_

Please include a photo of your yard with the application

Other animals in the home:

Type (dog, cat, bird, horse, etc.)	Name	Sex & Age	Breed	Altered? Y/N	Personality (shy, dominant, friendly, submissive, etc.)	From where did you obtain this animal? Rescue? Breeder? Shelter? Pet store?

Is someone home during the day? \_\_\_\_\_ # Hours the dog will be alone \_\_\_\_\_

Where will the dog be during the day? \_\_\_\_\_ At night? \_\_\_\_\_

**PREFERENCES (if any)**

Will you consider crating the dog? \_\_\_\_\_

Activity level you want -- or cannot tolerate

\_\_\_\_\_

Check the traits most important to you

\_\_\_ Good with children \_\_\_ Good with dogs \_\_\_ Good with cats \_\_\_ Travels well

\_\_\_ Friendly \_\_\_ Low energy level \_\_\_ High energy level \_\_\_ Plays fetch

\_\_\_ Easy to train \_\_\_ Can eventually go off leash \_\_\_ Doesn't chew

\_\_\_ Doesn't jump up \_\_\_ Will run with jogger

\_\_\_ Obedience competition potential

Other traits/characteristics that are important to you

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Why area you interested in this dog at this time?

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## HOME

Do you live in (circle) House Townhouse Apartment Duplex Other \_\_\_\_\_

Own or rent? \_\_\_\_\_ If renting, does your lease allow pets? \_\_\_\_\_

How will the dog be exercised \_\_\_\_\_

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Other pets you have had in the last 10 years:

Type (dog, cat, bird, horse, etc.)	Name	Sex & Age	Breed	Altered? Y/N	Where is this pet now?	If deceased, how did they die?

Have you ever participated in training with a dog? \_\_\_\_\_

Do you plan to train this dog? \_\_\_\_\_

What will you do with the dog when you travel? \_\_\_\_\_

**REFERENCES**

Please give the names and phone numbers of two personal references:

\_\_\_\_\_

\_\_\_\_\_

Please give the name and phone number of the veterinarian you plan to use, preferably one you have used previously, if possible.

\_\_\_\_\_

I ACKNOWLEDGE THAT ALL THE INFORMATION CONTAINED IN THIS FORM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY MISREPRESENTATIONS OF FACT MAY RESULT IN THE REMOVAL OF DOG, IF ADOPTED, FROM MY HOME BY KAREN EARLY.

Signed \_\_\_\_\_ Date

Signed \_\_\_\_\_ Date