



Linn & Chuck & Christa McChancy  
14364 Brown Rd  
Sabillasville, MD 21780  
(301) 416-0407

## Prospective Puppy Owner Questionnaire

Name

Street Address

City  State  Zip

Home Phone  Cell Phone

Email

### About your residence

Do you Own  Rent  your home?  
If you rent, what is the property's pet policy?

How long have you lived there?

Are you planning on relocating any time soon? Yes  No  Do you have a fenced in yard? Yes  No

If yes, how tall and what type of fence

If no, are you willing to put up a minimum of 4 ft high fencing? Yes  No

Do you use any of the following in or around your home: lawn treatment/bug control/paid treatment services?  
Yes  No

### About you and your family

Please list the names, ages and sex of all who reside in your home:

Is anyone in your household expecting or planning a baby? Yes  No

Does anyone in your household smoke, chew tobacco, or drink heavily? Yes  No

Does anyone in your household have allergies? Yes  No

Does anyone in your household have a fear of dogs? Yes  No

What is your activity level?

# Your prior dog ownership

Do you currently own or have owned a dog in the past? Yes  No

If yes, where did you get the dog from?

What breed/type was it?

What is its current age or how old was it when it passed away?

If from a breeder please list name and phone number.

Have you ever house trained a dog before? Yes  No

Have you ever attending any dog training classes? Yes  No

If yes, what was the highest level?

If no, are you willing to attend classes? Yes  No

Have you ever given a dog away? Yes  No

Have you ever returned a pet to the breeder? Yes  No

Have you ever taken a pet to the pound or shelter? Yes  No

If yes to any of the above three questions please state why

# Your interest and plans for a Beardie

How did you become interested in a Bearded Collie? What do you like about them?

Why do you want a dog at this time?

Preference on the sex of the dog

Who will be taking care of the dog?

Where will the dog be kept?

Are you willing to crate train this puppy? Yes  No

Where will the puppy be at night?

Will this puppy be left alone for long periods of time? i.e. when you are at work or the kids are at school. If so, for how long and where will the puppy stay during this time?

Are you interested in showing or doing performance events with your dog?      Yes       No

If yes, please explain

Do you plan to breed this dog?    Yes     No

If yes, why?

If yes, are you willing to co-own the dog?    Yes     No

If you are not planning to breed the dog are you willing to accept a limited registration on the dog?    Yes     No

Unless otherwise agreed upon, all dogs from Blessings Kennel are registered with AKC with limited registration.

If you are not aware of what limited registration is please view this page: <http://www.akc.org/reg/limitedreg.cfm>

Are you willing to spay or neuter your dog?    Yes     No

Are you willing to return the dog to us if you are unable to keep it for any reason?    Yes     No

Do you have any other animals in your home? What are they, how many, ages, and do they get along with dogs?

Are you willing to let us visit your home or have someone visit on our behalf?    Yes     No

Are you willing to keep us up-to-date on the health of the dog and your contact information on at least a yearly basis?    Yes     No

How did you hear about us

If Breeder or Other please list

## References

Vet

Name

Street Address

City  State  Zip

Phone

Please provide 2 neighbors or friends whom we may talk to:

Name

Street Address

City  State  Zip

Phone

Relationship

Name

Street Address

City  State  Zip

Phone

Relationship

I understand that owning a dog is a commitment for the dog's lifetime. I certify that the information I have provided in this application is true and accurate.

Signature

If you wish to email this form back to us please save your completed form and attach it to an email addressed to [inquiries@blessingsbeardies.com](mailto:inquiries@blessingsbeardies.com)