Echo View Dalmatians (perm. reg'd) Ownership Questionnaire

revised January 10, 2024

Thank you for taking the time to answer the following questions. By doing so we can better assess which puppy would best suit your lifestyle. Please feel free to add other relevant information (on back) or to ask any questions you may have for us. Return the completed ownership Questionnaire and the signed Sales Agreement & Guarantee and 3 reference letters. When approved we will notify you. If we feel that a Dalmatian is not the right breed for you we will assist in finding the perfect breed for your lifestyle. We reserve the right to refuse your application. (feel free to write more on the back of this questionnaire)

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1.	Why does the Dalmatian breed appeal to you and/or your family?		
2.	Do you consider yourself/family to be active in such a way that it would include a Dalmatian? How So?		
3.	Do you have any personal experience with Dalmatians? Yes No		
4.	Have you ever owned a Dalmatian or other breed of dog? Yes No If so what became of that dog?		
5.	Have you ever had to euthanize a dog? If so, why?		
6.	Have you read any information on Dalmatians? Yes No		
7.	Are you interested in a -pet/companion puppyconformation show/breeding prospect- or -performance Dalmatian? (circle choices that pertain) (show/breeding prospects are sold under a separate contract)		
8.	Do you own your own home? Yes No If you rent we require a letter of permission from your landlord.		
9.	Do you have a completely fenced yard? Yes No		
10.	O. If not are you willing to make a large secure enclosure? Yes No If not, please explain why not		
11.	1. Is everyone in your household in agreement with getting a Dal, especially the lady of the household. Yes No		
12.	2. Do you and/or your partner/spouse have a steady Job? Yes No N/A		
13.	3. How long have you/they been employed at the present place of employment?		
14.	4. Please list your place(s) of employment and include a phone #.		
15.	5. Describe your neighbors the dog will be involved with (do they like dogs, are there children, etc)		
16.	5. Is someone home during the day? Yes No If not, what kind of arrangements will you make for your new pupp		
17.	. Who will your new puppy be sharing your home with? If there are children, what are their names & ages?		
18.	Does anyone in your family have allergies to dogs or cats or asthma? Yes No		
19.	If yes, how severe? Mild moderate severe		
20.	. Are you aware that chaining a puppy or adult up can cause him/her to become aggressive Yes No		

21. Does your particular lifestyle have room for a puppy and that Dalmatians are NOT an outside pet? Yes No

- 22. Are you aware that Dals are very active and need plenty of exercise and will shed 2X's a year...6 months in the spring and 6 months in the fall? Yes No 23. Are you **physically** able to care for a Dalmatian? EG: getting up to let the dog outside several times a day....taking it
- 24. Are you interested in participating in obedience or other canine sports? Yes No IF you are interested in earning CKC (Canadian Kennel Club) titles please let us know. A Bi-lateral hearing dog is necessary for performance activities.

for walks minimum 2X's a day and care for the Dal including but not limited to nail care etc.

25. Are you aware that a pet quality Dalmatian must be neutered/spayed after 12 months of age. Yes No 26. Please be aware that we require you to take your new puppy to at least one (1) set of puppy socializing classes before the registration papers are transferred into your name(s). Yes No 27. Do you understand the advantages of using a crate? Yes No. 28. When would you ideally like to be able to get a puppy? 29. Do you realize that you are making a commitment for the dogs life, which could be up to 15 years? Yes No 30. Please be aware and agree that you must notify us first if you are unable to keep your Dal. Yes No 31. How will you exercise your Dalmatian? 32. Are you prepared to properly vaccinate, provide necessary veterinary treatment, feed a high quality food, license your Dal as per your area's requirement and never allow your Dal to be a neighborhood nuisance? Yes No 33. What will you do with your Dal when you go on vacation? 34. What will you do with your Dal if you need to move? 35. Under what circumstances would you return your Dal? (circle all which pertain) Moving; loss of Job(s), new baby; divorce; new relationship; high cost of animal care; allergies; vacation; retiring; aggression; Dal no longer wanted; there is no reason we would return the Dal. Other? 36. What behavior problems are you willing to tolerate and work on: Barking; chewing; separation anxiety; house breaking problems; jumping up; shedding; digging; property damage; mouthing; aggression; all problems. Other? 37. Are you willing keep us informed of your Dalmatians progress with regular updates and photos at least twice a year? Yes No 38. Where will the Dal spend the day? Loose indoors; crate; basement; garage; fenced yard; loose outdoors; kennel

41. Please provide us with three (3) reference letters. (example: employer, minister, vet, teacher, councilor, etc) Please have them include their phone numbers. No family members please.

run; tied up outside; other?

40. Have you ever surrendered a pet to the SPCA or other rescue organizations? Yes No

run; tied up outside/inside; other?

If yes, Please indicate the reason.

39. Where will the Dal spend the night? Loose indoors; crate; basement; garage; fenced yard; loose outdoors; kennel

42. Do you have a regular Veterinarian? Yes No If yes, ple	ase provide us with the Vet's name & phone #.				
43. From what source did you hear about Echo View Dalmar	Page 2				
44. Please circle your age group (primary care-giver): 18 –	25, 26 – 35, 36 – 50, 51 – 65, older				
Incomplete and/or falsified answers will lead to an automatic rejection of this application.					
If you are 18 years old or younger and live at home, a signed intent of purchasing a puppy is required and a phone contact v					
Date:					
Name: (must be signed by all those that wish their name on the	ne registration papers – must be 18 years of age or older)				
Address:City:	Prov: PC:				
Home #:					
Work #:					
Cell #:					
e-mail address:					
Signature(s):(signature(s)	(print name(s)				
Witness:(signature(s)	(print name(s)				
Witness's Address & Phone #:					
(office use)					
Notes:					
(Signed as read and filed) Echo View Dalmatians (Bonnie Hetherington)					
Date:					