

**HAV’S of HAVRE De GRACE**

Debbie Heydt

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**AKC HAVANESE**

**PET SPAY/NEUTER**

**SALES CONTRACT & HEALTH AGREEMENT**

**THE FOLLOWING SALE & AGREEMENT ARE MADE AND ENTERED INTO BY AND BETWEEN:**

**BREEDER:** Debbie Heydt – Hav’s of Havre de Grace

**BUYER(s):** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

The above **BREEDER** hereby transfers to the above **BUYER(s)**, and on this \_\_\_\_\_ day of \_\_\_\_\_, year of \_\_\_\_\_; delivered to the **BUYER(s)** listed above, a purebred Havanese ( MALE / FEMALE ) puppy, which was whelped on \_\_\_\_\_.

The American Kennel Club Litter Registration number for this litter is: \_\_\_\_\_.

Sire of this litter is: \_\_\_\_\_ Dam of this litter is: \_\_\_\_\_.

The consideration for this sale shall be the sum of \$ \_\_\_\_\_. This puppy price does not include any veterinary care of puppy expenses, and is accepted based on the terms and conditions hereinafter set forth and initialed below:

**THE BUYER(s) AGREE:** (Please initial each item after reading)

\_\_\_\_\_ 1. To register the puppy with the American Kennel Club by or before the puppy is 12 months old, to be completed by the **BUYER(s)**. The completed application is sent to the **BUYER(s)** from the **BREEDER** after the **BREEDER** receives a copy of the spay/neuter certificate from the **BUYER(s)**.

\_\_\_\_\_ 2. The **BREEDER** will be held responsible if a hereditary deformity or abnormality issue occurs within the **FIRST YEAR** only. Compensation of total purchase price will be considered only after a licensed Veterinarian confirms the condition, the **BREEDER** must receive written documentation.

\_\_\_\_\_ 3. That the **BREEDER** will accept the return of the dog at any time the **BUYER(s)** declines to keep said dog. It is to be returned to the **BREEDER** at the **BUYER(s)** expense, however, the **BREEDER** is not obligated to refund any of the consideration.

\_\_\_\_\_ 4. That the puppy is sold as a PET with a limited registration and is **NOT TO BE BRED**; that the female puppy will be spayed / male puppy neutered around the age of ten (10) months. A copy of the SPAY/NEUTER CERTIFICATE will be mailed to the **BREEDER** for her records. If the puppy is bred in direct violation of this contract, the ownership of the resulting litter is the **BREEDER's** and the **BUYER(s)** will be responsible to the **BREEDER** for damage to the reputation of the **BREEDER**.

\_\_\_\_\_ 5. **BUYER(s)** will provide adequate veterinary care, including but not limited to annual checkups and heartworm test; will keep all immunizations and heartworm preventative current; will provide adequate housing for this dog within the **BUYER(s)** home; will confine the dog when outdoors and refrain from restraining the dog on a chain/trolley/rope; will take the puppy to a puppy kindergarten and/or basic obedience class and/or teach the puppy basic manners; and will provide adequate daily exercise.

\_\_\_\_\_ 6. **DO NOT ADMINISTER LEPTOSPIROSIS** vaccines to the dog as they are unnecessary and possibly detrimental to its health.

**THE BREEDER HEREBY AGREES TO THE FOLLOWING AND HAS SET FORTH HER INITIALS:**

\_\_\_\_\_ 1. The **BREEDER** guarantees that the puppy is in good health and has received appropriate medical inoculations and care including distemper and parvo inoculations and deworming. **BREEDER** will provide **BUYER(s)** with a medical chart detailing treatment the puppy has received under **BREEDER's** care.

\_\_\_\_\_ 2. The puppy is in healthy condition on the date of the signing of this agreement and that the **BUYER(s)** have the right to return the puppy to the **BREEDER** within fourteen (14) days of the date of this agreement if it is found to be unhealthy, for a full refund of the consideration paid once the puppy binder and the AKC Registration Certificate have been returned to **BREEDER**. A written statement from the **BUYER(s)** Veterinarian as to why the puppy was found to be unhealthy, must be given to the **BREEDER** prior to the refund granted.

\_\_\_\_\_ 3. **BREEDER** strongly recommends the **BUYER(s)** have the puppy examined by a licensed Veterinarian and obtain a schedule for the vaccinations and health checks within fourteen (14) business days from the signing of this agreement.

\_\_\_\_\_ 4. **BREEDER** will NOT guarantee the height and/or weight of a mature dog.

Signature

Printed Name

Date

**BREEDER:** \_\_\_\_\_

**BUYER(s):** \_\_\_\_\_

**CoOWNER(s):** \_\_\_\_\_