

# STUD SERVICE CONTRACT

**This is to certify that:**

**Stud Dog Name:**

**AKC #:**

**Owner's Name(s):** Abigail Crosby

**Address:** PO Box 233, 2465 Collins Rd., Jacksonville, VT 05342

**Phone #:** 617-417-2050 / 802-368-2444

**Was bred to:**

**Bitch Name:**

**AKC #:**

**Owner's Name(s):**

**Address:**

**Phone #:**

## CONDITIONS OF SERVICE

**The bitch owner will provide copies of numbers 2 through 6 below:**

- 1) The bitch must be in good health and condition.
- 2) The bitch must have an AKC Full Registration certificate.
- 3) Hips/Elbows: Proof of OFA clearances, or acceptable alternative hips and elbows evaluations.
- 4) Eyes: CERF clearance certificate and/or ACVO Ophthalmologist exam report.
- 5) D Locus: Proof of D Locus (Dilute) testing with clear, and not carrier or affected, result.
- 6) A four generation pedigree.
- 7) The stud dog is guaranteed to be in the same good health and to provide the same certifications required of the bitch.

### **Additional Terms or Conditions:**

- 1) A \$500 non-refundable service fee is due prior to the first breeding.
- 2) A litter is defined as 2 live puppies at 8 weeks.
- 3) Balance of \$2,000 is due at the time of signing the litter registration for 2 or more live puppies, but no later than 8 weeks post whelp/birth.
- 4) Zero balance is due at time of signing the litter registration for only 1 live puppy.
- 5) No refund, no credit, and no repeat services are due if 1 or no live puppies result from this breeding.
- 6) For shipped semen, the bitch owner is responsible for all associated additional costs.

Dates of Breedings: \_\_\_\_\_

Approximate Due Date: \_\_\_\_\_

\_\_\_\_\_  
Stud Owner: Abigail Crosby      Date

\_\_\_\_\_  
Bitch Owner:      Date