Shirley Davis

Boshi Standard Poodles

113 Eberhard Ave. Palatka, FL. 32177

386-983-5400

PUPPY DEPOSIT AGREEMENT

The Seller, SHIRLEY DAVIS, Boshi Poodles, hereby accepts a deposit of $500.00 applicable to the purchase price of a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ companion Standard Poodle Puppy.

 (Indicate male or female)

By executing this agreement, the buyer acknowledges that this agreement contains the entire agreement for this reservation. This deposit is not refundable, as once a deposit is made, the seller is obligated to hold that puppy for the buyer and will turn down all other inquiries for a home for that puppy. This deposit is refundable only if the desired specified puppy is not available from this litter. The buyer may choose to leave the deposit in place for a future breeding. A separate purchase agreement will be issued at the time the puppy is ready to go to its new home, outlining all terms of ownership.

The balance of the total purchase price will be due prior to the puppy leaving (less the $500.00 deposit); payable by cash or money order only, if paid at the time possession is taken. Checks are acceptable with time for clearance prior to puppy pickup date.

All puppies will be registered with AKC. ALL puppies’ registered names will begin with a kennel prefix of BOSHI. I understand that companion pet puppies are sold under a spay/neuter agreement with limited registration.

**DEPOSIT CHECK SHOULD BE PAYABLE TO: SHIRLEY DAVIS**

I have read the above agreement and agree to its terms.

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE: (home) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (cell) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_