

Change of Ownership Form

Previous Owner Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone #s: _____ Email: _____

My signature below signifies my understanding that, while I intend to transfer ownership, I am still responsible for all charges associated with my pet's care prior to that transfer.

Previous Owner Signature: _____ Date: _____

New Owner Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone #s: _____ Email: _____

My signature below signifies my understanding that I will be responsible for all charges associated with this pet from today forward and my awareness that all services are to be paid in full at the time of service.

New Owner Signature: _____ Date: _____

Pet Information

Name: _____ Breed: _____

Color: _____ Date of Birth: _____ Sex: _____

Balances must be paid in full prior to ownership transfer. Please attach a copy of a valid identification for each client.

CCS Name: _____ Date Submitted: _____