



StoneForged Setters

Llewelin Setter Puppy Buyer Application

Thank you for your interest in a Llewelin Setter puppy. This application helps ensure our puppies are placed in responsible, suitable homes. Please answer all questions honestly.

APPLICANT INFORMATION

Full Name: _____

Date: ____ / ____ / 20____

Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

HOUSEHOLD INFORMATION

Do you:

Own your home

Rent (Landlord Name/Phone): _____

Type of residence:

House Apartment Condo Other: _____

Do you have a fenced yard?

Yes No

If yes, type/height: _____

Number of adults in household: _____

Number of children: _____ Ages: _____

Does anyone in the household have dog allergies?

Yes No

DOG EXPERIENCE

Have you owned a dog before?

Yes No

Current pets (type, breed, age):

Are your current pets up to date on vaccinations?

Yes No

Have you ever had to rehome a pet?

Yes No

If yes, explain: _____

LIFESTYLE & ACTIVITY

Why are you interested in a Llewelin Setter?

How would you describe your activity level?

Low Moderate High Very Active

How will this dog be used? (check all that apply)

Family companion

Hunting (upland/game birds)

Hunting (waterfowl)

Field trials

Breeding (with approval)

Other: _____

How many hours per day will the dog be left alone?

_____ hours

Where will the dog stay during the day?

Where will the dog sleep at night?

TRAINING & CARE

Are you willing to train your dog?

Yes No

Training plans:

- Professional trainer
- Self-training
- Group classes
- NAVHDA (North American Versatile Hunting Dog Association)

Veterinarian name/clinic: _____

Phone: _____

SPAY/NEUTER AGREEMENT

I understand and agree that this dog will **not be spayed or neutered before 24 months (2 years) of age**, unless medically necessary and approved by a veterinarian.

Initials: _____

CARE COMMITMENT

I agree to:

- Provide proper nutrition and veterinary care
- Maintain vaccinations and parasite prevention
- Provide adequate exercise for a high-energy sporting breed
- Never surrender this dog to a shelter or rescue
- Return the dog to the breeder if I can no longer keep it

Initials: _____

REFERENCES

Veterinary Reference (if applicable):

Name/Clinic: _____

Phone: _____

Personal Reference:

Name: _____

Phone: _____

ADDITIONAL INFORMATION

Anything else you would like us to know:

SIGNATURE

I certify that the information provided is accurate and understand that submission of this application does not guarantee approval.

Signature: _____

Printed Name: _____

Date: ____ / _____ / 20____

Thank you for your interest in StoneForged Setters!