



Insured: _____

Policy: _____

What is the breed of the dog(s)? _____

Age of the dog(s)? _____

How many dogs do you have? _____

Has the dog ever bitten anyone? (circle) Yes No

Is the yard completely fenced? Yes No

Is the dog allowed outside the yard? Yes No

Is the dog current with shots? Yes No

Describe the dogs temperament?

Additional comments:

Insured's Signature: _____

Date: _____