



**APPLICATION TO ACQUIRE A BIEWER FROM  
THE BBCAR**

Name of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ email: \_\_\_\_\_

Please complete the following questionnaire:

1. Have you ever owned a Biewer? \_\_\_\_\_ If yes, for how long? \_\_\_\_\_  
Do you still have this dog? \_\_\_\_\_ If no, what were the circumstances of releasing  
the dog: \_\_\_\_\_
2. Why do you want a Biewer? \_\_\_\_\_
3. How many adults in your household? \_\_\_\_\_ How many children? \_\_\_\_\_ Ages: \_\_\_\_\_
4. Do you presently have other pets? \_\_\_\_\_ If yes, what kind? \_\_\_\_\_
5. Do you have a local veterinarian? \_\_\_\_\_ Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_
6. Are you willing to permit a rescue team member to visit your home? \_\_\_\_\_
7. Do you live in a house? \_\_\_\_\_ Apartment? \_\_\_\_\_ Do you own or rent? \_\_\_\_\_
8. How long have you lived at this address? \_\_\_\_\_ years \_\_\_\_\_ months
9. If renting, are you permitted to have pets? \_\_\_\_\_ Please provide name and contact information  
of landlord: \_\_\_\_\_  
\_\_\_\_\_

10. Do you have a fenced area? \_\_\_\_\_ If not, do you agree to enclose your yard or a portion thereof for the dog's safety? \_\_\_\_\_

11. Do you agree to provide all necessary veterinary care for the dog including vaccinations, and general healthcare? \_\_\_\_\_

12. Please provide two personal references:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

I (we) represent that I (we) have never been subject to legal action for cruelty to, or neglect of, animals. I (we) represent that I (we) have never owned an animal that has been confiscated by any animal control or humane organization for violations of animal control regulations or animal adoption agreements.

I (we) swear that the information contained above is true and correct to the best of my knowledge.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_