

Wind Chime Farms

Dirk and Sandra Toews

Chico, California

Phone: 530-894-1241

ANIMAL TRANSPORT CONTRACT

Responsible for Payment:

Farm Name: _____

Name: _____

Address: _____

City, State, and Zip: _____

Phone: _____ Cell: _____

Email: _____ Fax: _____

Pickup Information:

Farm Name: _____

Contact Name: _____

Address: _____

City, State, and Zip: _____

Phone: _____ Cell: _____

Email: _____

Delivery Information:

Farm Name: _____

Contact Name: _____

Address: _____

City, State, and Zip: _____

Phone: _____ Cell: _____

Email: _____

Animals to be transported:

Name	Breed	Sex	DOB	Color	Chip #	Name / # Tag

****All animals must be Micro-chipped****

Each animal must have the following:

1. Health Certificate dated within 30 days of transport destination date.
2. Proof of Negative Blood Tests as required by Destination State if any.
3. A BVDV Negative Report from the vet.
4. Up-to-date Immunizations and Parasite Control Health Records.

Items 1. & 2. Must accompany animals.

Items 3. & 4. Must be sent to Wind Chime Farms with this agreement.

Please email to windchimealpacas@aol.com

Terms and Conditions

_____, hereafter referred to as “client”, must provide proof of current insurance and health certificate for the animals being transported. Any and all known health issues must be disclosed prior to the animal being transported. Wind Chime Farms reserves the right to refuse transportation of any animal that we feel may not be ready or able to travel.

It is known that Wind Chime Farms is not the named insurer of the animal’s’ and cannot be held responsible for the animal’s health or condition(s) for any reason. The result of any loss (including death) or injury for any reason will require the client to seek restitution from the named insurer and not Wind Chime Farms. Wind Chime Farms will use reasonable and customary care in transporting client’s animals to include seeking veterinary care if we see fit. If the client cannot be contacted via given contact information, the client authorizes Wind Chime Farms to seek medical care, as deemed necessary. Wind Chime Farms shall be entitled to reimbursement for any care given on the behalf of the animal’s health and safety.

With the above information agreed upon by the client, the client hereby releases Wind Chime Farms from any claim resulting from the loading, unloading and transportation of client’s animals.

_____ Client’s initials ____/____/____ date

Insurance Company: _____

Insurance Binder Number: _____

We are self-insured and agree to the above release.

_____ Client’s initials ____/____/____ date

Rate Schedule

A deposit of 50% is due upon the signing of this agreement. Due to expenses involved in cancellations, this deposit is refundable only if the Wind Chime Farms is unable to make the trip as scheduled. Client is responsible for all medical bills, health certificates, non-routine expenses, and travel insurance. In the event that the required paperwork is not available when the transporter arrives to pick up the animals, the animals will not be transported and the deposit will not be refunded.

Transportation Fee: \$_____ for animals identified on the attached schedule. *Client must pay the remaining balance at time of pick-up.* Payment is to be made payable to Dirk Toews.

Deposit received:

Date ___/___/___ Amount: \$_____

Balance due to transporter prior to departure: \$_____

Transporter:

Wind Chime Farms

Signature

Date

Client agrees to the terms and conditions set forth within this document.

Print Name

Print Farm Name

Signature

Date