



## **SUPPLEMENTAL PET QUESTIONNAIRE**

NAMED INSURED: \_\_\_\_\_

POLICY #: \_\_\_\_\_

1. Breed of dog: \_\_\_\_\_
2. Age of dog: \_\_\_\_\_
3. How long owned: \_\_\_\_\_
4. Weight: \_\_\_\_\_
4. Is the dog kept in a completely fenced yard? \_\_\_\_\_
5. Is the dog chained? \_\_\_\_\_
6. Is the dog walked on a leash? \_\_\_\_\_
7. Is the dog allowed to run loose? \_\_\_\_\_
8. Has the dog had obedience training? \_\_\_\_\_
9. Has the dog ever bitten anyone or any other animal or caused any type of property damage? If yes, please explain. \_\_\_\_\_
  
10. Is the pet an animal other than a dog? If yes, please explain what type and answer the questions above. \_\_\_\_\_

**Signature of Owner:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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