

# Ruckerhill Farm

Don & Sheryl Gaskell \* Winchester, Ky. 40391 \* Phone; 859-749-6159

[www.ruckerhilljacks.com](http://www.ruckerhilljacks.com)

## TRANSPORT AGREEMENT

Pet ground transportation provided by Ruckerhill Farm is for all size and types of pets. Please fill out the following form for a quote. There is a reservation fee dependant on pick up location to lock in your date and guarantee transport service. Rates will very dependent on Ruckerhill equipment needed or if owner's equipment is used. We are flexible with arrangement and are willing to discuss arrangements and rates. Please Submit the basic form below to don @ruckerhilljacks.com and we will talk...

Pet Owner (Print Name): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone- Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Pet's Name: \_\_\_\_\_ Species/Breed: \_\_\_\_\_ Weight/Height: \_\_\_\_\_

Pickup Address: \_\_\_\_\_ Time AM/PM: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact: \_\_\_\_\_ Cell: \_\_\_\_\_

Delivery Address: \_\_\_\_\_ Time AM/PM: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact: \_\_\_\_\_ Cell: \_\_\_\_\_

Comments: \_\_\_\_\_

The following terms and conditions are understood and agreed to by both parties:

1. Prior to transport, the owner of the Pet must provide a Health Certificate for interstate travel, proof of ownership, and if equine- a negative coggins test. The pet's temperature will be taken before loading and will only be transported if normal.
2. Payment for reservation fee is due one week prior to the time of the service unless otherwise specified in the initial arrangement for transport.
3. It is understood that the transporter shall maintain reasonable care of the pet while in our care.
4. The transporter shall not be held responsible for any loss, injury or death of the pet while under their supervision or while in transit so long as reasonable care is taken.
5. In addition to the transport fee, it is understood that the owner of the pet will assume costs incurred by the transporter for any medical treatment by a veterinarian required for the pet while under the supervision of the transporter. It is agreed that the transporter shall determine the need for any emergency care for the pet while under their supervision and **signing this agreement is a release for the Transporter and any DVM to provide emergency treatment for this animal...**
6. It is the pet owner's responsibility to advise of any kennel/transport habits the pet may have that could possibly present a problem in giving adequate and safe care while in the transporters care, and also to furnish any instructions, special feed, and medication for any special care required.
7. It is the pet owner's responsibility to be sure that the pet and contact person is available at the designated time for transport and drop off. A phone call will be made timely prior to arrival at both pickup and drop off. An hourly rate of \$50 will be applied if pickup or delivery time is delayed more than an hour from the transporters arrival.

8. This Agreement shall be governed by and construed in accordance with the laws of the state of Kentucky, without giving effect to the principles of conflicts of laws. The parties hereto irrevocably: (i) agree that any suit, action or other legal proceeding arising out of this Agreement shall be brought in the courts of the State of Kentucky or the courts of the United States located in Kentucky, (ii) consent to the jurisdiction of each court in any such suit, action or proceeding, (iii) waive any objection which they, or any of them, may have to the laying of venue of any such suit, action or proceeding in any of such courts, and (iv) waive the right to a trial by jury in any such suit, action or other legal proceeding. This Agreement represents the entire agreement between the owner and the transporter. No other agreements or promises, verbal or implied, are included unless specifically stated in this written Agreement.

\_\_\_\_\_  
Pet Owner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Transporter Signature

\_\_\_\_\_  
Date

Office Use –

Approx Miles: \_\_\_\_\_

Loaded Hours: \_\_\_\_\_

Days of Travel: \_\_\_\_\_

Planned Expenses: \_\_\_\_\_

Reservation Fee: \$ \_\_\_\_\_

\_\_\_\_\_ Total Est\$ \_\_\_\_\_