



# Broadview Reproductive Services

134 Ten Rod Road, Rochester, NH 03867 • (603) 335-2120

## Transfer of Ownership of Frozen Canine Semen

This document, when completed, signed and dated, transfers the ownership of the frozen canine semen described below to the new owner(s) designated below. Please send this completed form to ICSB-NH & S. ME at the address above. **Note: The original signature must be submitted on this form. A FAX copy is not binding and will not be honored.**

I, \_\_\_\_\_  
(Name of present owner and all co-owners of frozen semen)

Do hereby transfer all rights of ownership and interest in the following frozen semen, its use, and resultant offspring to the new owner(s) listed below. The frozen semen is from:

\_\_\_\_\_  
(Registered name of Dog)

\_\_\_\_\_  
(Registry)                      (Registration Number)

\_\_\_\_\_  
(Breed)

The following semen from the above dog is to be transferred to the new owner(s) list below.

Date of collection: \_\_\_\_\_ Number of inseminations: \_\_\_\_\_

Date of collection: \_\_\_\_\_ Number of inseminations: \_\_\_\_\_

Date of collection: \_\_\_\_\_ Number of inseminations: \_\_\_\_\_

or **ALL** semen from above dog \_\_\_\_\_  
(Signature here if all semen is to be transferred)

We do transfer all ownership and interest in the frozen canine semen specified above from the above dog to:

\_\_\_\_\_ (Printed name of new owner)

\_\_\_\_\_ (Address of new owner)

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

I/we, being the sole owner(s) of the frozen canine semen from the above designated dog, realize that all interest, ownership and liability of the above listed canine semen and its resultant use, offspring produced from it, and/or its transfer to other individuals, are no longer mine/our concern and now belong to the person(s) listed above as new owners.

X \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of present owner Printed name

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

X \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of co-owner Printed name

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

X \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of co-owner Printed name

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

X \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of **witness** Printed name

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



INTERNATIONAL CANINE SEMEN BANK - NH & S. ME  
Email: [CanineRepro@BroadviewVet.com](mailto:CanineRepro@BroadviewVet.com)  
Website: [www.BroadviewVet.com](http://www.BroadviewVet.com)