

# Massachusetts Animal Bill of Sale Form

## 1. PARTIES

This Bill of Sale is made on the \_\_\_\_ day of \_\_\_\_\_, 20, between:

- **Seller:**
  - Full Name: \_\_\_\_\_
  - Address: \_\_\_\_\_
  - City, State, ZIP Code: \_\_\_\_\_
  - Phone Number: \_\_\_\_\_
- **Buyer:**
  - Full Name: \_\_\_\_\_
  - Address: \_\_\_\_\_
  - City, State, ZIP Code: \_\_\_\_\_
  - Phone Number: \_\_\_\_\_

## 2. ANIMAL DETAILS

- Animal Type: \_\_\_\_\_
- Breed: \_\_\_\_\_
- Age: \_\_\_\_\_
- Sex: \_\_\_\_\_
- Color: \_\_\_\_\_
- Markings: \_\_\_\_\_
- Health Status: \_\_\_\_\_

## 3. SALE DETAILS

The Seller agrees to sell, and the Buyer agrees to buy, the described animal for the following amount:

- Purchase Price: \$ \_\_\_\_\_ (U.S. Dollars)

#### 4. TERMS AND CONDITIONS

**1. Payment Method:**

- The full purchase price will be paid by:
  - Cash
  - Check
  - Other: \_\_\_\_\_

**2. Representations and Warranties:**

- The Seller certifies that they are the lawful owner of the described animal and that it is free of all liens, security interests, and other encumbrances.
- The Buyer acknowledges receipt of the animal in "as-is" condition without any warranties.

**3. Health Disclosure:**

- The Seller certifies that the animal is in good health to the best of their knowledge and has received the following vaccinations and treatments:
  - Vaccinations: \_\_\_\_\_
  - Treatments: \_\_\_\_\_
  - Vet Records Attached: [ ] Yes [ ] No

**4. Signatures:**

- Seller's Signature: \_\_\_\_\_ Date: \_\_\_\_\_
- Buyer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_
- Witness's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### 5. NOTARY ACKNOWLEDGMENT

State of \_\_\_\_\_ County of \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20, by

\_\_\_\_\_ (Seller) and \_\_\_\_\_

(Buyer).

- **Notary Public:** \_\_\_\_\_
- **My Commission Expires:** \_\_\_\_\_