



Colorado Veterinary Specialists

223 W. County Line Rd. Littleton, CO 80129

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www.covetspec.com

FROZEN SEMEN RELEASE FORM FOR DOMESTIC SHIPMENTS

Submission Date: _____ Requested Delivery Date: _____

Semen Owner Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Dog Information

Registered Name: _____

Registration Number: _____ Breed: _____

Number of Straws to be Shipped: _____ Original Collection Date: _____

Semen owner signature

Veterinarian Information - Semen will only be shipped to a veterinarian

Veterinarian Name: _____

Clinic Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Bitch and Bitch Owner Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Registered Name: _____

Registration Number: _____

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Dry Shipper Agreement

A credit card number is required for shipment of frozen semen. There is a \$1000.00 deposit required for use of a dry shipper to transport frozen semen. If the shipper is not returned within five business days, a \$15/day charge will accrue until day fifteen (15) at which time a forfeiture of the deposit will occur. The deposit will not be charged unless the tank is not returned or is returned damaged through no fault of the shipping company.

Estimated Summary of Charges

Frozen semen preparation for transport	\$90.00
Dry shipper rental	\$92.00
Rush preparation fee	\$95.00
Shipping fees for overnight delivery and 2-day return	\$230.00 – 280.00
Saturday Delivery	\$15.00 – 30.00
Additional Insurance on Shipment	\$1.00 per \$100.00

Rush fee: Shipments requested without three business days notice are considered rush shipments and incur an additional \$88 fee.

Additional Insurance: Customer assumes responsibility for the shipment once it leaves Colorado Veterinary Specialists. The shipment is insured for \$1,000.00 to cover the cost of dry shipper replacement only. Additional purchased Insurance will cover the contents of the vapor shipper. The fee is an additional \$2.00 per \$100.00 additional insurance.

Credit Card Authorization

I, the undersigned, understand that Colorado Veterinary Specialists has provided an estimate for the preparation and shipping of frozen semen. By signing this agreement, I authorize Colorado Veterinary Specialists charge my credit card for the charges as provided in the estimate. In addition, if the tank is not returned within 15 days or if it is returned damaged through no fault of the shipping company, I understand that my credit card will be charged an additional \$1,200.00 replacement fee.

Name on credit card: _____

Credit card number _____

Ex. date _____ cvv code _____ Billing zip code: _____

Additional insurance requested (optional, \$200 minimum): _____

FedEx account number if you would like to be billed
for shipping directly by FedEx. (optional) _____

**PLEASE EMAIL TO REPRODUCTION@COVETSPEC.COM
OR FAX TO 303-794-4881**