

EXOTIC REPTILE HISTORY



Owner's Name: _____ Date: _____

Pet Information:

Pet's Name: _____

Species, Subspecies: _____ Age/DOB: _____

Sex: Female Male Unknown Duration in owner's care/captivity: _____

Origin (captive bred, wild import): _____

Source (breeder, pet shop): _____

Enclosure/vivarium specifications

Type (arboreal, terrestrial, aquatic): _____ Size: _____

Construction (materials, fittings): _____

Decor and furnishings: _____

Cleaning routine (agents used): _____

Environment

Heating equipment: _____

Lighting equipment: _____

Daytime temperature gradient: _____

Nighttime temperature gradient: _____

Water temperature: _____

Photoperiod: _____

Humidity: _____

Diet

Type and quantity: _____

Frequency of feeding: _____

Time when food is offered: _____

Changes of appetite: _____

Water

Method of provision (spray, bowl): _____

Frequency of water changes; water quality: _____

Changes in drinking behavior: _____

Type and frequency of use: _____

Supplements in water or food: _____

Breeding details: _____

Other specimens in same vivarium: _____

Other specimens in same room or air space: _____

Disease history of presented animal: _____

Details of any disease in-contact animals: _____

Quarantine protocol: _____

Other details of relevance: _____
