

# HEALTH DECLARATION FOR HORSE SALES


Sale :	NZB Ready-to-Run Sale 2021	Lot Number :	278
Name of horse :	UN-NAMED	Year of birth :	2019
Breeding (Sire) :	ZACINTO	(Dam) :	JAPPHIRE LASS
Sex :	GELDING	Colour :	BROWN

## PART ONE: VENDOR'S (OR AGENT'S) STATEMENT:

1.	Name :	HAUMU FARM	Relationship to vendor :	AGENT
2.	Source of horse :	Homebred	<input checked="" type="radio"/> Yes / <input type="radio"/> No	
		Other (give details)		
3.	Horse's weight :	512 kg	Date weighed :	10/11/21
4.	Horse's height :	16 hh		
				Circle as appropriate
5.	During the horse's ownership, has it suffered from any form of colic, intestinal disorder or undergone abdominal surgery?			Yes / <input checked="" type="radio"/> No
	OR Is there any evidence of previous abdominal surgery?			Yes / <input checked="" type="radio"/> No
	If yes to either of the above questions, provide details below:			
6.	During the horse's ownership, has it suffered from any significant illness or disease?			Yes / <input checked="" type="radio"/> No
	If Yes, please provide details below:			
7.	During the horse's ownership, has it suffered from any accident, lameness, fracture, tendon, or ligament injury?			Yes / <input checked="" type="radio"/> No
	If Yes, please provide details below:			
8.	During the horse's ownership, has it undergone invasive joint surgery, surgical fracture repair or surgical intervention of the upper respiratory tract?			Yes / <input checked="" type="radio"/> No
	If Yes, please provide details below:			
9.	To the best of your knowledge, is the horse in good health and does it exhibit normal clinical signs at the time of this report?			<input checked="" type="radio"/> Yes / <input type="radio"/> No
	If NO, please provide details below:			

	Details of any abnormalities noted above and/or other comments:

I certify that to the best of my knowledge and belief, the above particulars are correct and true.

Name	:	SHANNON TAYLOR
Signed	:	
Date	:	10 / 11 / 21

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## PART TWO: VETERINARIAN'S STATEMENT:

1.	Name of horse and/ or Lot Number :	SAPPHIRE LASS' 19 - LOT 278	Circle as appropriate
	Microchip # :	985125000105517	
	Brands :	HF, 46 over 9	
2.	Does an external examination of the eye with a bright light reveal any abnormalities?		Yes / <input checked="" type="radio"/> No
	If Yes, provide full details below:		
3.	Is horse an entire male and does it have two palpable and descended testicles?		Yes / No
	If No, provide full details below:		
	OR already castrated		<input checked="" type="radio"/> Yes
4.	Does the horse have a "club" foot or "club" feet?		Yes / <input checked="" type="radio"/> No
5.	Is there evidence of an undershot mandible ("Parrot mouth")?		Yes / <input checked="" type="radio"/> No
6.	Is auscultation of the heart within normal limits?		<input checked="" type="radio"/> Yes / No
	If No, provide full details below:		
7.	Are both jugular veins patent?		<input checked="" type="radio"/> Yes / No

	Details of any abnormalities noted in 2-7 above:

Disclaimer

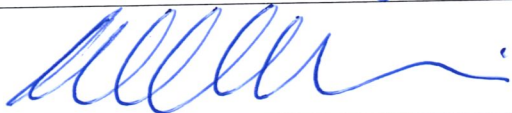
Lot No: 278

This document has been prepared for the sole use by the veterinarian engaged by the Purchaser/Purchaser's agent. It is understood and agreed that this document will only be used for the purpose of the veterinarian engaged by the purchaser advising their client and is only for the New Zealand Bloodstock "Ready-to-Run" sales on 17-18 November 2021. No other use is permitted.

It may not be used or relied on (in whole or part) by anyone else, or for any other purpose or in any other contexts, without our prior written agreement.

The Purchaser/Purchaser's agent understands and accepts that the veterinarian and practice make no statement, representation or warranty about this horse's soundness, suitability for purchase or fitness for purpose.

The Purchaser/purchaser's agent is deemed to be aware that any information or opinion contained in this report is only based on a reasonable assessment of the matters in 1-7 above. Some clinical signs of disease, injury or abnormality that may have manifested themselves in a full examination may not be apparent. The veterinarian and practice accept no responsibility or liability in relation to any issues unrelated to 1-7 above.

Name	:	MARK CHITTY BVSc
Signed	:	
Date	:	10/11/21
For and on behalf of Clinic (Clinic name):		HAUNNI FARM LP