

**HAUNUI FARM** | *Thoroughbred***DECLARATION OF HEALTH – KARAKA 2022**


|                    |                      |               |              |
|--------------------|----------------------|---------------|--------------|
| Lot                | 967                  | Colour        | Bay          |
| Sex                | Colt                 | Use           | Thoroughbred |
| Sire               | Almanzor             | Dam           | Our Essence  |
| Microchip No.      | 985125000119877      | Year of Birth | 2020         |
| Height:            | 15.2 LH              | Weight:       | 479 kg       |
| Veterinary Surgeon | Dr Mark Chitty, BVSc |               |              |

|    |                                                                                                                                                                                                                                                            |                                         |                                        |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|----------------------------------------|
| 1  | Was the horse born and raised at Haunui Farm? If NO, please provide details below.                                                                                                                                                                         | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| 2  | During the last 12 months, has the horse suffered from any form of colic or other intestinal/digestive disorder, or undergone any abdominal surgery? Is there any external evidence of previous abdominal surgery? If YES, please give full details below. | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| 3  | During the last 12 months, has the horse suffered from any other illness or disease? If YES, please give full details below.                                                                                                                               | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| 4  | During the last 12 months, has the horse suffered from any accident, lameness, fracture, tendon or ligament injury. If YES, please give full details below.                                                                                                | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| 5  | During the last 12 months, has there been any evidence of contagious or infectious disease in the location where the horse is kept? If YES, please give full details below.                                                                                | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| 6  | Has the above horse ever suffered from melanomas, sarcoids, warts or any other type of growth? If YES, please give full details below.                                                                                                                     | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| 7  | If the horse is a colt, is there evidence of two testicles? If NO, please explain below.                                                                                                                                                                   | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| 8  | Does this horse have a parrot mouth?                                                                                                                                                                                                                       | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| 9  | Does this horse have a club foot/feet? If YES, please explain below.                                                                                                                                                                                       | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| 10 | To the best of your knowledge is the horse in good health and does the horse exhibit normal clinical signs? If NO, please give full details below                                                                                                          | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |

Further information in respect of questions 2 – 10.

Other Comments;

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

|        |                                                                                     |            |             |
|--------|-------------------------------------------------------------------------------------|------------|-------------|
| Signed |  | Print Name | MARK CHITTY |
|        | Dr Mark Chitty, BVSc                                                                |            |             |
| Date   | 23/2/22                                                                             |            |             |

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