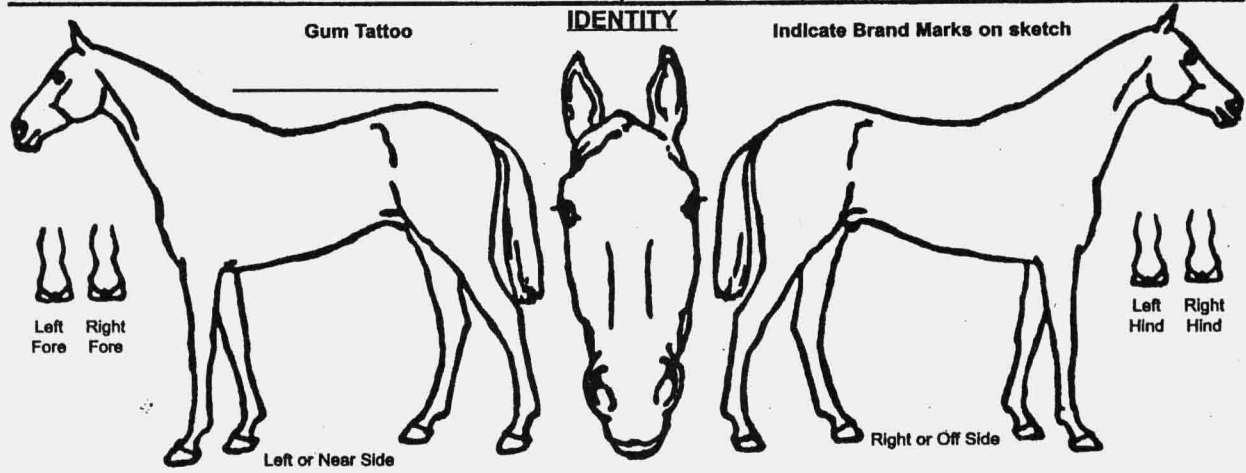


VETERINARIAN'S REPORT FOR INSURANCE PURPOSES

(To be completed by the animal's usual Veterinarian)

Name of Owner _____ Address _____ Name of Trainer/Proprietor of Stables _____ Address of stables/farm where animal is kept _____	Name of Horse _____ Sex _____ Breed _____ Age _____ Intended use: <table style="display: inline-table; vertical-align: top; margin-left: 10px;"> <tr> <td style="padding: 2px;">Racing</td> <td style="width: 20px; height: 20px; border: 1px solid black;"></td> <td style="padding: 2px;">Breeding</td> <td style="width: 20px; height: 20px; border: 1px solid black;"></td> </tr> <tr> <td style="padding: 2px;">Hackney</td> <td style="width: 20px; height: 20px; border: 1px solid black;"></td> <td style="padding: 2px;">Polo</td> <td style="width: 20px; height: 20px; border: 1px solid black;"></td> </tr> <tr> <td style="padding: 2px;">Dressage</td> <td style="width: 20px; height: 20px; border: 1px solid black;"></td> <td style="padding: 2px;">Eventing</td> <td style="width: 20px; height: 20px; border: 1px solid black;"></td> </tr> <tr> <td style="padding: 2px;">Show jumping</td> <td style="width: 20px; height: 20px; border: 1px solid black;"></td> <td></td> <td></td> </tr> </table>	Racing		Breeding		Hackney		Polo		Dressage		Eventing		Show jumping			
Racing		Breeding															
Hackney		Polo															
Dressage		Eventing															
Show jumping																	
Colour <table style="display: inline-table; vertical-align: middle; margin-left: 10px;"> <tr> <td style="width: 40px; height: 20px; border: 1px solid black;">Chestnut</td> <td style="width: 40px; height: 20px; border: 1px solid black;">Grey</td> <td style="width: 40px; height: 20px; border: 1px solid black;">Bay</td> <td style="width: 40px; height: 20px; border: 1px solid black;">Brown /Black</td> <td style="width: 40px; height: 20px; border: 1px solid black;"></td> </tr> </table>		Chestnut	Grey	Bay	Brown /Black												
Chestnut	Grey	Bay	Brown /Black														



GENERAL QUESTIONS TO BE ANSWERED BY VETERINARIAN

Please give a definite answer to each question and provide full details to any illness, injury or abnormality, inclusive of dates

1. Has the animal described herein suffered from:

(a) Recurrent Colic?	(b) Lameness during the past year?	(c) Equine Influenza?
(d) Ruptured Bloodvessels or other defects in the Circulatory System?	(e) Biliary Fever?	
(f) Laminitis?	(g) Any serious illness or injury?	

2. What vaccinations have been administered during the past year and when were they administered? If not administered by a Veterinarian, name vaccinator:

Horse sickness		Equine Influenza			Tetanus	Botulism	Anthrax
(1)	(2)	(1)	(2)	(3)			

3. What diseases are active in the environment? _____
4. Is the animal clinically normal? (include Genitalia) _____
If not, give detailed diagnosis and prognosis. _____
5. Describe any defective conformation and/or lesions which may have prognostic significance _____
6. Is there any evidence of vices e.g. Crib-biter, Kicker, Weaver, Wind-sucker etc? _____
7. Has the animal required Veterinary attention during the last 12 months? If so please specify _____
8. Are the eyes normal on ophthalmoscope examination? _____
9. Have you examined the animal at work related to its intended use? If not give reasons _____
10. (a) Respiratory rate at rest: _____ (b) Is respiration at work normal? If no specify details _____
11. Heart rate: (a) Before work? _____ BPM (b) After work? _____ BPM (c) 20 minutes after work? _____ BPM
12. Specify any special examination indicated _____

FINAL CONCLUSIONS: In the opinion of the examining Veterinary Surgeon this horse is/is not a suitable subject for insurance cover in respect of death cover only for the use intended above.

REMARKS: _____
 Signature _____ Date of Examination _____

THE FEE FOR THIS EXAMINATION IS FOR THE OWNER'S ACCOUNT

All horses must be examined at work in their intended use category for which insurance is requested. No cover will be granted unless the horse is suitably worked for this examination.