

Seller's declaration in respect of the sale of a horse

The horse								
Name of horse								
Sex		Breed/ type		Age			Colour	
The horse has been in the ownership of the seller since								
The horse is in work				If yes, describe				
Passport number				Microchip number				

The following is completed to the best of my knowledge and belief					
Has the horse received any medication during the past 30 days?	If yes, describe				
Has the horse been lame?	If yes, describe				
Has the horse received intra-articular joint medications in the last 12 months?	If yes, describe				
Has the horse had any medical problems (such as colic, skin problems, coughing)?	If yes, describe				
Has the horse had any surgical treatment?	If yes, describe				
Has the horse had any reproductive problems?	If yes, describe				
Has the horse demonstrated any vices (such as cribbing, windsucking, weaving)?	If yes, describe				
Has the horse demonstrated behavioural abnormalities (such as head-shaking, box-walking, biting)	If yes, describe				

The horse is routinely						
When stabled, is bedded on	If other, describe:					
Is fed	If other, describe:					
Was last shod/trimmed on						
Was last vaccinated on						
Vaccinations were for the following diseases						
Was last tested for worms or dewormed on						
Provide details						
Last underwent dental examination / routine rasping						
Provide details						
As the of the horse described above, I declare that the information provided here is true and accurate.						
Name and address of						
Signature of	Date					