



DECLARATION OF HEALTH – 2020 RTR Sale


Lot	65	Colour	Bay
Sex	Colt	Use	Thoroughbred
Sire	Belardo	Dam	Short Tale
Microchip No.	985125000107105	Year of Birth	2018
Height:	15.2 ½ hh	Weight:	493 kg
Veterinary Surgeon	Mark Chitty		

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 GEOFFREY CHITTY
	Mark Chitty, BVSc		2453
Date	15/11/20		