

CERTIFICATE OF VETERINARY EXAMINATION OF A HORSE PRIOR TO SALE AT AUCTION

(See Note 1)

The notes 1 to 4 appear on the reverse of this certificate

THIS IS TO CERTIFY THAT:

On: (Date & Time) 25/6/21 9:00

AT THE REQUEST OF AND ON BEHALF OF THE SELLER

Seller's Name & Address: Mr. J. DAVENPORT
DAVENPORT STABLES
ARCLID FARM,
NEWCASTLE ROAD, BREKETON CW11 2SN

I HAVE EXAMINED THE HORSE DESCRIBED BELOW WHICH IS TO BE

ENTERED FOR SALE BY AUCTION ON (Date of Sale) 9/7/21

AT (Place of Sale) BOLESWORTH ELITE AUCTION

SELLER'S DECLARATION:

I declare that the horse described opposite is offered for sale as being suitable for:

I declare that this horse has not received any surgery, medication or abnormal nutrients likely to interfere with the findings of a clinical examination and is not subject to any disease, injury, physical abnormality or any vice, other than recorded below or declared here:

This certificate is to be used solely in connection with the sale shown opposite.

Signature

Date

DESCRIPTION OF THE HORSE

Horse's Name <u>CERANO VAN DE DIJKHOEVE Z</u>	Breed or Type <u>WARMBLOOD</u>	APPROXIMATE AGE RANGE by Denition OR by Documentation* (* delete as appropriate)
Passport Number <u>056015Z55505715</u>	Sex <u>GELDING</u>	(See Note 2) <u>6yr.</u>
Microchip Number <u>981100004137390</u>	Colour <u>GREY</u>	

STAGES OF THE EXAMINATION (See Note 3)

Omitted stage(s) _____ of the standard procedure because _____

During the third stage of my examination the horse was (State the type of exercise) RIDDEN

Flexion tests were performed on the following limbs: LEFT FORE / RIGHT FORE / LEFT HIND / RIGHT HIND (delete those tests not performed) _____

Trotting on a small diameter circle on a firm surface WAS / WAS NOT performed

A blood sample WAS / WAS NOT taken from the horse during the examination (for medication analysis if required).

REPORT OF RELEVANT CLINICAL FINDINGS

① ASYMMETRIC FRONT FEET, LEFT FORE MORE UPRIGHT THAN RIGHT FORE
- SOUND ON HARD AND SOFT LUNGE

② OLD SCARS ON NOSE AND LEFT SHOULDER, GRAZE ON RIGHT
STIFLE - NO CLINICAL SIGNIFICANCE

Report continued on attached sheet YES / NO

OPINION OF THE EXAMINING VETERINARY SURGEON (See Note 4)

In my opinion, on the balance of probabilities, the clinical findings reported above DO / DO NOT prejudice this horse's suitability to be used for HIGH LEVEL SHOWJUMPING.

Veterinary Surgeon's Signature

P.E. Scholerfeld

Date of Signature

26/6/21

Veterinary Surgeon's Name

P.E. SCHOLERFELD

And Address
(In Block Capitals)

MIRD & PARTNERS CHESHIRE

COWLEY OAK, TATTENHALL, CHESHIRE CH3 9BA

THE EXAMINATION REFERRED TO IN THIS CERTIFICATE MUST TAKE PLACE WITHIN 14 DAYS OF THE AUCTION