



Justification of Value Record For Leased Horses

Insured's Name:		Policy Number:
Name of Horse:		Date of Birth:
Sire:	Dam:	Stud Fee If Home bred: \$

Note the following information is required for all leased horses:

1. Owner of Record: _____ Purchase Date & Price: _____
2. Owner Name & Address (if different from insured): _____

3. If horse is being leased out, need lessee's name & address: _____

4. Does lease include a purchase option? Yes No Purchase Option Price: _____

Show Information for Prior 12 Months

Name of Show & Rating	Date	Name of Class or Division	Number of Entries	Placing

Training Record

1. Total cost of Training excluding board: \$ _____ Amount of time in training: _____ mos. _____ yrs.
2. Name & Location of Trainer: _____
3. Type of Training: _____

Breeding Record

Stallions		Broodmares	
# of Mares Bred/Booked Current Year		Total No. of Foals Produced	
Stud Fee Current Year		Highest Price Paid for Any Foal	
No. of Mares Bred Last Year		Is Mare in Foal Now?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Stud Fee Prior Year		If yes, name of sire & stud fee.	

Additional Information / Comments to Support Value

I, the undersigned, declare that to the best of my knowledge and belief the above statements are true and complete and that I have not withheld any material information. I further declare that no insurer has declined or refused to renew my insurance, and that there are no other circumstances within my knowledge not already disclosed which might affect the proposed insurance.

Signed:	Date:
---------	-------