

Butch Human, Manager P.O. Box 2250 Advance, NC 27006 info@starhinsurance.com

Substantiation of Value Horses



This document forms part of the Animal Mortality Application

Applicant's Name Mail Address City, ST Zip					Policy Number: Animal Name: Purchase Price: \$					
Phone					Purchase Date:					
Fax					Amount c	of				
E-Mail Address					Insurance Desired: <u>\$</u>					
Breed Use					Sex Date of Birth					
Sire: Dam:				Sex Date of Birth Registration Number						
Show / Performance Record(s)										
Show / Competition					Class / Number of Division Entries		Placer	.	Number of Points	
							_	\$		
								\$		
								\$		
								Ψ		
Training Record(s) Name of Trainer		Type of Training			Cost of Training (Excluding Board, Vet and Maintenance Fees) Per Month Number of Months Total Cost					
							\$			
\$										
Breeding Stallions										
Number of Non-Owned Mares Booked This Year		Number of Non-Owned Mares Bred This Year			Stud Fee Charged			This Years Annual Breeding Income*		
Number of Non-Owned Mares Booked Last Year		Number of Non-Owned Mares Bred Last Year			Stud Fee Charged			Last Years Annual Breeding Income*		
*D							a vou after the fulfillment of breading contracts			
*Breeding Income is defined as the amount of money that was earned in that particular year when stud fees were paid to you after the fulfillment of breeding contracts. Any Additional information										
Broodmare Record										
Number of Live Number of			r of Foals /			elling Price of	ls	Mare Pregnant now?	Due Date	
Births Since Owned Sold Since Ov		wned Averag		Full Siblings Half Siblin			(If Yes, Amount of Stud/Service Fee)			
		\$	\$			\$		□No \$		
Foal Record										
Stud Fee of Sire			Avera	ng Price of lings			Average Selling Price of Half Siblings			
\$							\$			
Other Information to Substantiate Value:										
		- 1			1.0	-1	2 - 1 2 - 7	- (1		
Applicant declares the Applicants Signature	atements ar	e true and co	e, and th	iat no matei	rial inform		1.			
							Dat	с .		