



## DECLARATION OF HEALTH – 2022 NATIONAL ONLINE SALE

Lot:	35	Colour	Grey
Sex	Colt	Use	Thoroughbred
Sire	Reliable Man	Dam	Firostefani
Microchip No.	985125000119793	Year of Birth	2020
Brands:	NS: <b>HF</b> OS: <b>72</b>		
Height:	<b>15.2 1/2 hh</b>	Weight:	<b>479 kg</b>
Veterinary Surgeon	Dr 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? <i>If YES, please give full details below.</i>	<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? <i>If YES, please give full details below.</i>	<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. <i>If YES, please give full details below.</i>	<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? <i>If YES, please give full details below.</i>	<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? <i>If YES, please give full details below.</i>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
7	If the horse is a colt, is there evidence of two testicles? <i>If NO, please explain below.</i>	<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? <i>If YES, please explain below.</i>	<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? <i>If NO, please give full details below</i>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

Further information in respect of questions 2 – 10.

Other Comments;

**OLD SCAR LATERAL ASPECT LEFT HORE PASTERNA - NOT CLINICALLY SIGNIFICANT.**

I hereby certify that to the best of my knowledge and belief the above particulars are true and correct.

Signed		Print Name	<b>MARK CHITTY</b>
	Dr Mark Chitty, BVSc		
Date	<b>13/14/22</b>		