

A: ANIMAL IDENTIFICATION TO BE COMPLETED BY A VETERINARY SURGEON

(12) Right side
Côté droit

(13) Left side
Côté gauche

TRANSPONDER

(14) Upper eye level
Ligne supérieure des yeux

(15) Fore Rear view
Antérieurs Vue postérieure

(16) Neck Lower view
Encolure Vue inférieure

(17) Muzzle
Nez

(18) Hind Rear view
Postérieurs Vue postérieure

Left Gauche Right Droit

MiCroChiP number:

PLEASE AFFIX BARCODE STICKER HERE

Pursuant to Commission Regulation (EC) 262/2015 I can confirm that I read the microchip for the animal identified on this application and it was:

Previously implanted Implanted today (tick one)

Signature and stamp of the veterinarian or qualified person or competent authority (name in capital letters)/
Signature et cachet du vétérinaire ou de la personne qualifiée ou de l'autorité compétence (nom en lettres capitales)

It is a statutory requirement that a qualified veterinary surgeon and member of the Royal College of Veterinary Surgeons (RCVS) verifies the identification section above. The same veterinary surgeon is responsible for the completion of the written description which can be found in section E of this application.

B: ANIMAL DETAILS

animal name:

Colour: Sex:

Date of birth: Country of birth:

Place of birth:

Species: **D: CHESTNUTS** FOR HORSES WITHOUT MARKINGS & LESS THAN THREE WHORLS

C: SIRE AND DAM IF KNOWN

Sire - ueIn:

Sire - name:

Dam - ueIn:

Dam - name:

foreleg left

foreleg right

hindleg left

hindleg right

FOR OFFICE USE ONLY

A ANIMAL IDENTIFICATION **r**continued

ANIMAL NAME:

Grid for animal name

E ANIMAL DESCRIPTION

HEAD:

Grid for head description

FORELEG L:

Grid for foreleg left description

FORELEG R:

Grid for foreleg right description

HINDLEG L:

Grid for hindleg left description

HINDLEG R:

Grid for hindleg right description

Grid for general animal description

MARKINGS:

Grid for animal markings

F OFFICIAL SIGNATURE AND STAMP

SIGNATURE OF QUALIFIED PERSON (NAME IN CAPITAL LETTERS):

STAMP OF ISSUING BODY OR COMPETENT AUTHORITY:

Signature box with date of examination field: DATE OF EXAMINATION: | DD / MM / YY |