

  
**KAPLOW**  
INSURANCE AGENCY  
800.823.0201 Fax: 914.238.4043  
**REQUIRED FOR EVERY ACCOUNT**

**JUSTIFICATION OF VALUE(S)**

*We require the following information for our records*

Name of owner(s) \_\_\_\_\_

Name of horse \_\_\_\_\_ Breed \_\_\_\_\_ Age/DOB \_\_\_\_\_ Use\* \_\_\_\_\_

Sire \_\_\_\_\_ Dam \_\_\_\_\_

Purchase price \_\_\_\_\_ Date of purchase \_\_\_\_\_

**Stallion Breeding Record**

Current stud fee \_\_\_\_\_ Last season's stud fee \_\_\_\_\_

Number of mares serviced last season \_\_\_\_\_ Outside \_\_\_\_\_ Inside \_\_\_\_\_

Number of mares booked for this/next season \_\_\_\_\_

**Broodmare Breeding Record**

Number of foals since purchase \_\_\_\_\_ Number of Foals Sold \_\_\_\_\_ Ave. Price \_\_\_\_\_

Selling Price of Full Brothers/Sisters \_\_\_\_\_ 1/2 Brothers/Sisters \_\_\_\_\_

Is the Mare in Foal Now (if yes, stud's name and current fee) \_\_\_\_\_

Projected due date \_\_\_\_\_

**Show Record**

Use \_\_\_\_\_ Performance Record 1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_ Other \_\_\_\_\_

Show points last 12 months \_\_\_\_\_ Winnings last 12 months \_\_\_\_\_

Winnings total \_\_\_\_\_ Monies earned \_\_\_\_\_

**Training Information**

Monthly Training Fee \_\_\_\_\_ Total Training Since Purchase \_\_\_\_\_

I certify that the facts in this questionnaire are true and complete to the best of my knowledge and that I have not withheld any pertinent information.

Signature \_\_\_\_\_ Date \_\_\_\_\_

\* For Use state: Race, Performance, Halter, Hunter Jumper, Barrels, Roping, Cutting, Dressage, Breeding