

# ASEA Inc

## CERTIFICATE OF SOUNDNESS

This Certificate is to be completed by a Veterinarian

I \_\_\_\_\_ do hereby certify,  
that on (date) \_\_\_\_\_ I have examined the horse named below.

### HORSE DETAILS

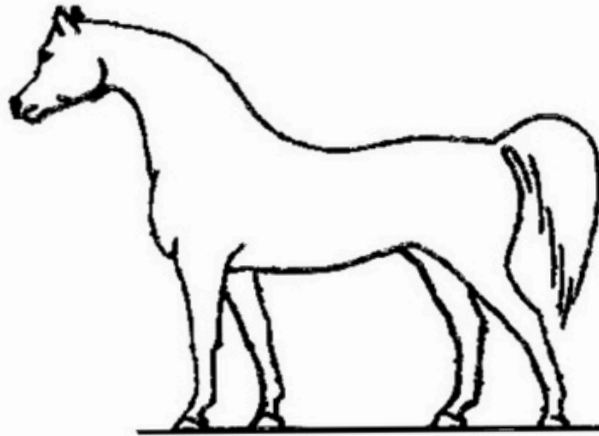
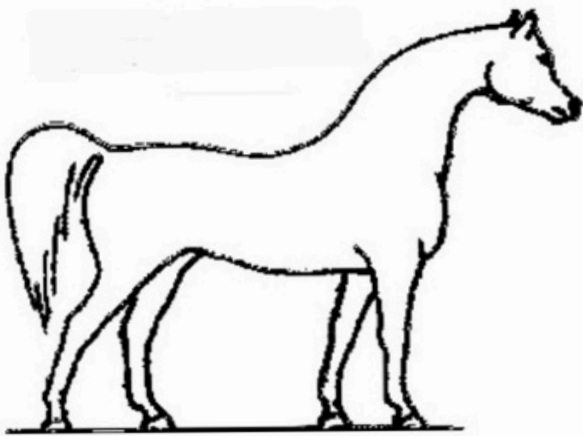
Name of Horse: \_\_\_\_\_

Rego No: \_\_\_\_\_ Height: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Colour: \_\_\_\_\_

Microchip No/Brand: \_\_\_\_\_ NS: \_\_\_\_\_ OS: \_\_\_\_\_

Owned By: \_\_\_\_\_ ASEA Inc No: \_\_\_\_\_

Markings: \_\_\_\_\_



Insert Brands and Markings exactly as they appear on horse

Right (Off Side)

Left (Near Side)

Head Front

Overshot Jaw

Dwarfism

Congenital Cataract

Locked Stifle

Parrot Mouth

Malformation of Genitals

Other Congenial Leg Abnormalities

Other Determinable Genetic Faults : \_\_\_\_\_

And on this particular day it has been found that this horse has no visible signs of defects at the time of examination  
(if the horse is unsound or possess any faults as listed , please circle & comment accordingly).

Signature: \_\_\_\_\_

Qualifications: \_\_\_\_\_

Contact Details: \_\_\_\_\_

Send this Form to: [registrar@smallequine.com.au](mailto:registrar@smallequine.com.au)

