

**Substantiation of Value
Species other than Horses and Cattle**



This document forms part of the Animal Mortality Application

Applicant's Name _____ Mail Address _____ City, ST Zip _____ Phone _____ Fax _____ E-Mail Address _____	Policy Number: _____ Animal Name: _____ Purchase Price: \$ _____ Purchase Date: _____ Amount of _____ Insurance Desired: \$ _____
--	--

Breed _____ Use _____ Sex _____ Date of Birth _____
 Sire: _____ Dam: _____ Registration Number _____

Show / Performance / Trial Record(s)

Show / Competition	Show Rating		Date of Event	Class / Division	Number of Entries	Placement	Winnings	List Number of Points or Titles Earned
	N=National R=Regional S=State	D=District C=County L=Local						
							\$	
							\$	
							\$	
							\$	

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
				\$
				\$

Male Breeding Record

Stud Fee	Number of Animals Bred		Number of Bookings For Next Year	Total Number of Straws or Semen Samples Sold	Average Sale Price Per Unit	Is Service LiveCover or A.I.
	This Year	Last Year				
\$					\$	

Female Breeding Record

Number of Live Births Since Owned	Number of Offspring		Average Selling Price of		Is Animal Pregnant Now? Yes or No (If Yes, Amount of Stud/Service Fee)	Due Date
	Sold Since Owned	Average Selling Price	Full Siblings	Half Siblings		
		\$	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No \$	

Other Information to Substantiate Value:

Applicant declares the above statements are true and complete, and that no material information was withheld.

Applicants Signature _____	Date: _____
----------------------------	-------------