

HEALTH CERTIFICATE

Horse name : ALLEGRA HC 2 Date of Birth : _____
 SIRE number : _____ Horse's coat : _____
 Microchip number : _____ Cat. Size : _____
 Female Male Gelding

<u>Clinical examination</u>	Favorable	Satisfied	Guard	<u>Comments</u>
General body condition :	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Reproductive system :	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
External examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Veins and arteris :	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pouls & auscultation cardiaque :	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pulmonary auscultation :	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ophthalmic examination :	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Vision, reflex, ophthalmoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Skin :	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Signs of itching, sarcoids, scars....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Global

Signs of illness: Yes No

Vaccination: Influenza Tetanos EHV

Overall review conclusion:

Certified at, La Baulle le 12/06/26


REPERT Claude
 Dr Vétérinaire
 ordre 22 814
 St André des Eaux

*This examinations list carried out corresponds to a standard protocol recommended for auctions, but this list is not, however, exhaustive.
 At the request of future buyers, additional examinations may be carried out at their expense the day before the sale.*

This possibility offered to future purchasers also applies to the 16 standard X-rays presented which may also be supplemented by additional incidences at the request and at the expense of a future purchaser.