eUNDERWRITERS©
MANAGING GENERAL AGENT

Suite 106-3701 E. Hastings St.
Burnaby, B.C., Canada V5C 2H6
Phone (604) 293-1531
Fax (604) 293-1248

Value Justification / Performance Report

Name of Owner: _____

Address: _____ Phone #: _____

Name of Horse: _____ Policy#: LS_____

Date of Purchase: _____ Purchase Price: _____

Stud Fee (if known): _____

Insured Value or Requested Value: _____

Reason for Increase (if requested): _____

Training Level at time of purchase: _____

Training Level at present time: _____

Use of horse: _____

Cost of Professional Training (per year): _____(excluding board, veterinarian & farrier bills)

Name of Trainer: _____

Performance Report (or attach show record from C.E.F. passport or list details of accomplishments to support value)

Previous Twelve Months Prior to Application

SHOW NAME & LEVEL MONTH/YEAR DIVISION SHOWN PLACING

_____

_____

_____

_____

Any additional information (ie. offers to purchase, etc.)

_____

_____

If a broodmare: Is the mare in foal?: _____ Stallion Name: _____ Stud Fee: _____

# of Live foals: _____ Age of Foals: _____ Selling price(s) of foals: _____

Date: _____ Signature of Owner: _____