

Smith-Embry Insurance Associates, Inc.
3044 Breckenridge Lane Suite LL1
Louisville, KY 40220-2193

Phone (502) 493-9911
Fax (502) 493-0070
www.insurehorses.com

JUSTIFICATION OF VALUE Pleasure Use

Please supply the following information:

Name of Owner(s) _____

Name & Description of Animal _____

(Include Breed, Age, Sire/Dam)

Purchase Price _____ Date of Purchase _____

Stud Fee paid to produce this foal if homebred _____

Sire _____ Average sale price of foals _____

Dam _____ Average sale price of foals _____

Training Expenses (if any) _____

Description of Training _____

Type of Pleasure Riding (trail/arena) _____

Years of Pleasure Use _____

Average Number of Days per Month Horse is Ridden _____

Additional Comments (include level of expertise achieved during your ownership) _____

I, the undersigned, declare that to the best of my knowledge and belief, the above statements are true and complete, and that I have not withheld any material information.

Date _____ Signature _____