

REGISTRASIESERTIFIKAAT
Arabierperd Genootskap van Suid-Afrika

Hiermee word gesertifiseer dat hierdie MERRIE aangeneem is vir inskrywing in die Arabierperd Genootskap van Suid-Afrika

ARAB HORSE SOCIETY
OF SOUTH AFRICA

REGISTRATION CERTIFICATE
The Arab Horse Society of South-Africa

This is to certify that this MARE has been accepted for entry in the Arab Horse Society of South Africa

Naam Name **ASALA HELWAH (ZA)**
Gebore Born **06/04/2012** Gradering Grading **SP 90**
DNS DNA **Q1300915**
Skyfie Chip

Rekenaar Nr Computer No. **0012942819**
Registrasie Nr Registration No. **30006**
Deel Volume **37**

Strain. **SEGLAWIEH JEDRANIEH OF IBN SUDAN**

VAAR SIRE **ANSATA ALY SHERIF 12147 (Vol.30) [AHR*597632]**

MOER DAM **ASALA CYBER QUEEN 9515 (Vol.26)**

ANSATA IEMHOTEP

SHERIFA TAMRIA (EAI DAJALLI)

THEE CYCLONE 5301 (Vol.19) [AHR*509474]

SIDI TIRSA 3650 (Vol.15)

PRINCE FA MONIET (US)

ANSATA NEFARA (US)

ROYAL JALLIEL

IMPERIAL DAEEMAH

THEE DESPERADO

THE MINUET

WD MAJESTY 2870 (Vol.13) [AHR*362713]

LAR MALIKA 1597 (Vol.8) [AHR*211223]

THEEGYPTIANPRINCE

FA MONIET

ANSATA HALIM SHAH (US)

ANSATA SUDARRA

ANSATA IMPERIAL

PHARRAH

IMPERIAL IM DAEEM

IMPERIALPHARALIMA

THE MINSTRIL

AK AMIRI ASMARR

THE MINSTRIL

ALIAH HALIMA

PRINCE FA MONIET (US)

LAR MONIETA

AL FATTAH

TALARA



Teler Breeder **(0078858) MNR. W.J. SWART**
ASALA LANDGOED, BREDASDORP, 7280

(Parentage Verified)

Datum van inspeksie
Date of inspection

Datum van uitreiking
Date of issue **07/08/2026**

KORREK GESERTIFISEER
CERTIFIED CORRECT

HOOFBESTUURDER / GENERAL MANAGER
SUID-AFRIKAANSE STAMBOEKVERENIGING
SOUTH AFRICAN STUD BOOK ASSOCIATION
POSBUS 270 BLOEMFONTEIN BOX 270



CERTIFICATE
OF QUALITY
Valid up to
October 2029

Enige byvoegings en/of veranderings wat nie deur die Hoofbestuurder geparafeer is nie, sal hierdie Sertifikaat ongeldig maak.
Any additions and/or alterations not initialed by the General Manager will render this Certificate invalid

RECORD OF TRANSFERS · REKORD VAN OORDRAGTE

Passport Nr: SB10114 Name: ASALA HELWAH (ZA)

Trans Date Oordrags Datum	Name of Buyer Naam van Koper	Physical Address and Cell Number Posadres en Selfoon Nommer	Signature of Seller Handtekening van Verkoper	SA Stud Book SA Stamboek
28/02/2023	0551401 MNR. J.J. KOEN	POSBUS 234 BURGERSDORP, 9744	MNR. W.J. SWART	
02/12/2025	0731792 AL LAMRA ARABIAN STUD	THE HILLSIDE 269, LYNNWOOD PRETORIA, 0081	MNR. J.J. KOEN	

Notification of death: Date
Kennisgewing van dood: Datum

Signature of Owner: _____
Handtekening van Eienaar: _____

Notification of Gelding: Date
Kennisgewing van Kastrenging: Datum

Signature of Owner: _____
Handtekening van Eienaar: _____

GENERAL MANAGER/HOOFBESTUURDER

SEX

COLOUR

DATE OF BIRTH (DD/MM/YYYY)

SIRE

DAM

REGISTERED NAME

F

Grey

06-04-2012

ANSAHA ALY SHERIF

ASALA CYBER QUEEN

ASALA HELWAH

LIGHTLY FLEABITTEN

Outline diagram

Right side

Left side

Fore - Rear view

Neck - throat view

Muzzle

Hind - Rear view

WRITTEN DESCRIPTION OF MARKINGS:

HEAD: WHORL ON MEDIAN LINE AT UPPER EYE LEVEL. FLESHMARKS MUZZLE, UPPER AND LOWER LIP AND INSIDE NOSTRILS. BILATERAL MANDIBULAR WHORLS WITH FORWARD FEATHERING. RIGHT EYE MILD CORNEAL OPACITY.

LEFT FORE

RIGHT FORE

LEFT HIND

RIGHT HIND

MEDIAL FOREARM CHESTNUT.

MEDIAL FOREARM CHESTNUT.

MEDIAL HOCK CHESTNUT.

MEDIAL HOCK CHESTNUT.

ACQUIRED (BRAND/FREEZE MARKS OR PERMANENT SCARS)

NIL.

MICROCHIP STICKER

Expiry Date: 2030/06/01

900223004002776

NAME OF VETERINARIAN

DR TIENIKE TERBLANCHEBUS

SIGNATURE OF VETERINARIAN

DATE 07/07/2026

PRACTICE STAMP

KERKSTRAAT ANIMAL CLINIC

36 CHURCH STREET

BRONKHORSTSPRUIT

013 932 3096 / 079 957 0172

info@kerkstr.co.za

BODY / WHORLS

FOREHEAD WHORL ON MEDIAN LINE AT UPPER EYE LEVEL.

BILATERAL MANDIBULAR WHORLS WITH FORWARD FEATHERING.

THROAT WHORL.

BILATERAL PECTORAL WHORLS WITH UPWARDS FEATHERING.

BILATERAL MID-CHEST WHORLS WITH FORWARD FEATHERING.

BILATERAL FLANK WHORLS WITH UPWARDS FEATHERING.

**MULTIPLE MOVEMENT
PERMIT****Passport Nr: SB10114 Name: ASALA HELWAH (ZA)****Passport Number
SB10114****HORSE PASSPORT****ASALA HELWAH (ZA)****Not accepted at SAEF / FEI events.**

ISSUED BY:

***South African Stud Book
and Livestock Improvement Association*****P.O. Box 270 • Bloemfontein 9300****Tel: (051) 410-0900 • Fax: (051) 447-3964****CERTIFICATE
OF QUALITY**
Valid up to
October 2029

LABORATORY TEST
Passport Nr: SB10114 Name: ASALA HELWAH (ZA)

[illegible]

Continued

VACCINATION (OF NON-CONTROLLED DISEASES)

Passport Nr: SB10114 Name: ASALA HELWAH (ZA)

[illegible]

Continued

VACCINATIONS AGAINST EQUINE INFLUENZA

Passport Nr: SB10114 Name: ASALA HELWAH (ZA)

[illegible]

Continued

[illegible]

HEALTH CERTIFICATE FOR MOVEMENT (CONTINUED)

Passport Nr: SB10114 Name: ASALA HELWAH (ZA)

[illegible]

HEALTH CERTIFICATE FOR MOVEMENT

Passport Nr: SB10114 Name: ASALA HELWAH (ZA)

I, the undersigned, inspected this equine and certify that it:

1. showed no clinical signs of disease,
2. has not been in contact during the last 15 days (as far as can be ascertained) with other equidae suffering from an infectious or contagious disease,
3. does not originate from an area where veterinary restrictions pertaining to diseases communicable to equidae are in force and does not come from a holding under veterinary restrictions,
4. does not come from a holding where there has been a case of African horse sickness during the past 40 days,
5. originates from a holding, either in,
- the African horse sickness infected area or African horse sickness protection zone and was vaccinated against African horse sickness by a veterinarian using a registered polyvalent African horse sickness vaccine as prescribed by the vaccine manufacturer at least 40 days, and not more than 24 months , prior to movement,
- or
- the African horse sickness surveillance zone and was not vaccinated against African horse sickness during the past 40 days.
- Furthermore , I undertake to pre-notify the State Veterinarian: Boland of the movement of this equine.

NB. Movement must commence within 72 hours of signature of this certificate by your veterinarian.

ORIGIN			DESTINATION		DATE EXAMINED	NAME AND ADDRESS OF CERTIFYING VETERINARIAN	SIGNATURE OF CERTIFYING VETERINARIAN
Date of Departure	District	Holding	Date of Arrival	District			

Continued

IDENTIFICATION OF HORSE DESCRIBED IN THIS PASSPORT

Passport Nr: SB10114 Name: ASALA HELWAH (ZA)

DATE	TOWN AND DISTRICT	PURPOSE OF CONTROL (EVENT, HEALTH CERTIFICATE, ETC.)	SIGNATURE, NAME (PRINTED) AND STATUS OF OFFICIAL VERIFYING IDENTIFICATION
D D M M Y Y 			

VACCINATIONS AGAINST AFRICAN HORSE SICKNESS

Passport Nr: SB10114 Name: ASALA HELWAH (ZA)

Every vaccination against AHS which the equine undergoes must be entered clearly and in detail on this sheet in the space provided below.

[illegible]

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Passport Nr: SB10114 Name: ASALA HELWAH (ZA)

[illegible]