

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 **SHAHEER VENDETTA AL-RAJA (ZA)**

Gebore Born **02/03/2023** Gradering Grading **SP 85**

DNS DNA **Q2300342**

Skyfie Chip

Rekenaar Nr Computer No. **0013431655**

Registrasie Nr Registration No. **34352**

Deel Volume **48**

Strain.

VAAR SIRE **SIDI AL RAJA 33047 (Vol.43)**

MOER DAM **SHAHEER EL DETTA 8525 (Vol.25)**

SHAHEER RAJA 30891 (Vol.39)

SIDI MARIONET 10331 (Vol.49)

SIDI EL THABI 6849 (Vol.22)

THE VENDETTA 4921 (Vol.18) [AHR*496861]

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

SHAHEER BINT-HELWAH 16715 (Vol.34)

SIMEON SEGEV 9563 (Vol.26)

THE VENDETTA 4921 (Vol.18) [AHR*496861]

ARABEST NAFIS 5570 (Vol.20) [AHR*504793]

MINSTRILS MELODY 3803 (Vol.16) [AHR*461108]

THE MINSTRIL

ALIAH HALIMA

ANSATA IEMHOTEP

SHERIFA TAMRIA (EAI DAJALLI)

AL SHAKEL 13712 (Vol.31) [IASB*3283]

SIDI XANADU 9517 (Vol.26)

ASFOUR

SIMEON SHUALA

THE MINSTRIL

ALIAH HALIMA

AKID GESHAN

AMIRA RA

THE MINSTRIL

IL MIRIYA

RUMINAJA ALI

BAHILA

RUMINAJA ALI

CHARM OF HALIMA



Teler Breeder **(0109805) MNR. S.J.B. MARITZ
BUS 538, UPINGTON, 8800**

(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

[illegible]

Notification of death:
Kennisgewing van dood:

Date _____
Datum _____

Signature of Owner:
Handtekening van Eienaar:

Notification of Gelding:
Kennisgewing van Kastrering:

Date _____
Datum _____

Signature of Owner:
Handtekening van Eienaar:

GENERAL MANAGER/HOOFBESTUURDER

SEX	COLOUR	DATE OF BIRTH (DD/MM/YYYY)	SIRE	DAM	REGISTERED NAME
F	GREY DAPPLE	02-03-2023	SIOT AL RAJA	SHAHEER EL DETTA	SHAHEER Venter + A AL-RAJA

Outline diagram

MICROCHIP STICKER

Expiry Date: 03/03/2026
900223004002267

NAME OF VETERINARIAN
DR TIENIKE TEEB/ANCHE (SUS)

SIGNATURE OF VETERINARIAN

DATE 07/07/2026

PRACTICE STAMP
KERKSTRAAT ANIMAL CLINIC
36 CHURCH STREET
BRONKHORSTSPRUIT
013 532 3095 / 079 957 0172
info@kerkstr.co.za

WRITTEN DESCRIPTION OF MARKINGS:
HEAD: TWO VERTICAL WHORLS ON MEDIAN LINE AT AND ABOVE UPPER EYE LEVEL - FLESH MARK MUZZLE, UPPER LIP, ENTERING NOSTRILS
BILATERAL, LOWER LIP.

LEFT FORE	CHESTNUT MEDIAL CARPUS.
RIGHT FORE	CHESTNUT MEDIAL CARPUS.
LEFT HIND	WHITE HOOF. CHESTNUT MEDIAL CARPUS HOCK.
RIGHT HIND	CHESTNUT MEDIAL HOCK.

ACQUIRED (BRAND/FREEZE MARKS OR PERMANENT SCARS) NIL.

BODY / WHORLS
TWO VERTICAL FOREHEAD WHORLS ON MEDIAN LINE AT AND ABOVE UPPER EYE LEVEL
BILATERAL HIGH-CREST WHORLS.
TWO COAT FEATHERS
CENTRAL NECK FEATHER
BILATERAL PECTORAL FEATHERS
BILATERAL FLANK WHORLS WITH UPWARDS FEATHERING.

**MULTIPLE MOVEMENT
PERMIT****Passport Nr: SB10116 Name: SHAHEER VENDETTA AL-RAJA (ZA)****Passport Number
SB10116****HORSE PASSPORT****SHAHEER VENDETTA AL-RAJA (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

[illegible]

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LABORATORY TEST

LABORATORY TEST
Passport Nr: SB10116 Name: SHAHEER VENDETTA AL-RAJA (ZA)

[illegible]

VACCINATION (OF NON-CONTROLLED DISEASES)
Passport Nr: SB10116 Name: SHAHEER VENDETTA AL-RAJA (ZA)

DATE	PLACE AND DISTRICT	VACCINE			NAME (PRINTED), ADDRESS AND SIGNATURE OF VACCINATOR
		NAME	BATCH NUMBER	DISEASE	
D D M M Y Y 					

Continued

VACCINATIONS AGAINST EQUINE INFLUENZA

Passport Nr: SB10116 Name: SHAHEER VENDETTA AL-RAJA (ZA)

DATE OF VACCINATION	TYPE,NAME AND BATCH NO. OF VACCINE	NAME AND ADDRESS OF VACCINATOR AND CAPACITY (PLEASE PRINT)	SIGNATURE OF VACCINATOR
D D M M Y Y 			

Continued

[illegible]

HEALTH CERTIFICATE FOR MOVEMENT (CONTINUED)

Passport Nr: SB10116 Name: SHAHEER VENDETTA AL-RAJA (ZA)

[illegible]

HEALTH CERTIFICATE FOR MOVEMENT

Passport Nr: SB10116 Name: SHAHEER VENDETTA AL-RAJA (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: SB10116 Name: SHAHEER VENDETTA AL-RAJA (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: SB10116 Name: SHAHEER VENDETTA AL-RAJA (ZA)

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

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Passport Nr: SB10116 Name: SHAHEER VENDETTA AL-RAJA (ZA)

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