

Philna Moelich

From: elize@studbook.co.za
Sent: 06 April 2022 01:32 PM
To: 'Philna Moelich'
Cc: 'Lindi Joubert'
Subject: SA Boerperde : Aansoeke vir perde paspoorte
Attachments: Shiffon Paspoort aansoek.pdf; Snip paspoort aansoek.pdf; Janpha_Stamboek 2x paspoorte 6.04.2022.pdf

0705690 NON

Importance: High

Hello,

Ek was onder die indruk dit is Registreerde SA Boerperd wat jy voor aansoek doen vir Passpoorte.

Ek sien nou dit is nie, ek stuur die aansoek na Philna Hattigh wat die ongeregistreerde Perde Passpoorte uitreik .

Philna - die kostes is in die SA Boerperde se bankrekening betaal so jy sal ons moet faktureer en ek sal dit dan courier as dit gereed is.

Vriendelike Groete



Elize Prinsloo
Tel: 051 410 0900
Epos: elize@studbook.co.za
ABSA, Cheque Account, nr: 087 039 0432

Straat adres: Henry Straat 118
Posbus 1060
Bloemfontein
9300

From: Lindi Joubert <lindi@baleiawines.com>
Sent: Wednesday, 06 April 2022 12:36
To: elize@studbook.co.za
Subject: RE: Aansoeke vir perde paspoorte

Hi Elize,

Jammer, ek moes dit met die eerste epos aangeheg het en het skoon vergeet. Ek heg aan.

Ook aangeheg is die bewys van betaling vir 2x paspoorte + die aflewering.

Julle kan dit asb stuur na:

Baleia Wines
N2 (nasionale pad)
Riversdal
6670
(Dit is +-1km buite Riversdal rigting Mosselbaai)

Kan jy dalk vir my 'n faktuur stuur?

Groete,



From: elize@studbook.co.za <elize@studbook.co.za>

Sent: Wednesday, 06 April 2022 11:02 AM

To: 'Lindi Joubert' <lindi@baleiawines.com>

Subject: RE: Aansoeke vir perde paspoorte

Hello,

Kan jy die x2 perde se name vir my gee wil net seker maak die oordragte is gedoen.

Aangeheg is die aansoek vir Passpoorte, die kostes beloop R250 per passpoort en dan Courier Koste R130

Neem Asseblief kennis: Ons passpoorte is reg vir Vervoer van perde, MAAR nie vir buite skoue nie

Die bank besonderhede is onder my handtekening, stuur asseblief die voltooië vorms (ingevul deur veearts) en die betaling bewys na my toe indien julle nog die passpoorte benodig.

Vriendelike Groete



Elize Prinsloo
Tel: 051 410 0900
Epos: elize@studbook.co.za
ABSA, Cheque Account, nr: 087 039 0432

Straat adres: Henry Straat 118
Posbus 1060
Bloemfontein
9300

From: Lindi Joubert <lindi@baleiawines.com>

Sent: Wednesday, 06 April 2022 10:43

To: saboerperd@studbook.co.za

Subject: Aansoeke vir perde paspoorte

Goeiedag Elize,

Ek hoop dit gaan goed.

Ons het onlangs twee boer perde gekoop en ek wil graag aansoek doen vir perde paspoorte. Sal jy my dalk daarmee kan help?

Ek hoor graag van jou.

Groete,



BALEIA
Wines & Olive Oil

LINDI JOUBERT | ACCOUNTS
c: 082 494 4065 · e: lindi@baleiawines.com

N2, Riversdale, Cape South Coast, PO Box 268, Riversdale, 6670
t: 028 713 1214 · f: 086 560 0367



Baleia Wines



@BaleiaWines



@BaleiaWines

www.baleiawines.com



View Payment

Name :	Stamboek	Execution Date :	06 Apr 2022
Own Account :	Janpha (Pty) Ltd - 62738780792	Total :	630.00
Folder :		Thumbprint :	JA0t/bKYlLMev26hU6wCw==
Your recipient details			
Recipient	Account	Reference	Amount Pay Advice
Stamboek	0870390432	Joubert 2x paspoorte	630.00 No
			Reason

APPLICATION FOR HORSE PASSPORT
Registered Horse & Non Registered Horse



SA STAMBOEK
STUD BOOK

OWNER'S DETAILS

Name of owner	JAN-HENDRIK JOUBERT		
ID number	830326 5016 08 9		
Member number	0705690 NON		
Address of owner	UITRYK		
Telephone	082 322 6638 5	Postal code	6670
Fax	RIVERSDAL	E-mail	

HORSE DETAILS

Name of horse	Prefix	Name		SHIFFON	
Registration Number of horse	13392584	BIRTH DATE	± 2013	BREED	SA BOERPERD
RF ID Implant / Micro Chip Number	Yes / No	NO	Type of implant		
If yes, please supply number of code					

VACCINATION DETAILS

Date of two most recent Equine Influenza Vaccinations	Name & Batch No. of Vaccine	Name of person who administered Influenza Vaccine
Date of two most recent African Horse Sickness Vaccinations	Name & Batch No. Of Vaccine	Name of person who administered African Horse Sickness Vaccine

CERTIFIED BY VETERINARIAN – (SIGNED AND STAMPED)

I confirm that this horse received the African Horse Sickness vaccinations on the date stated on this form.

Signature _____

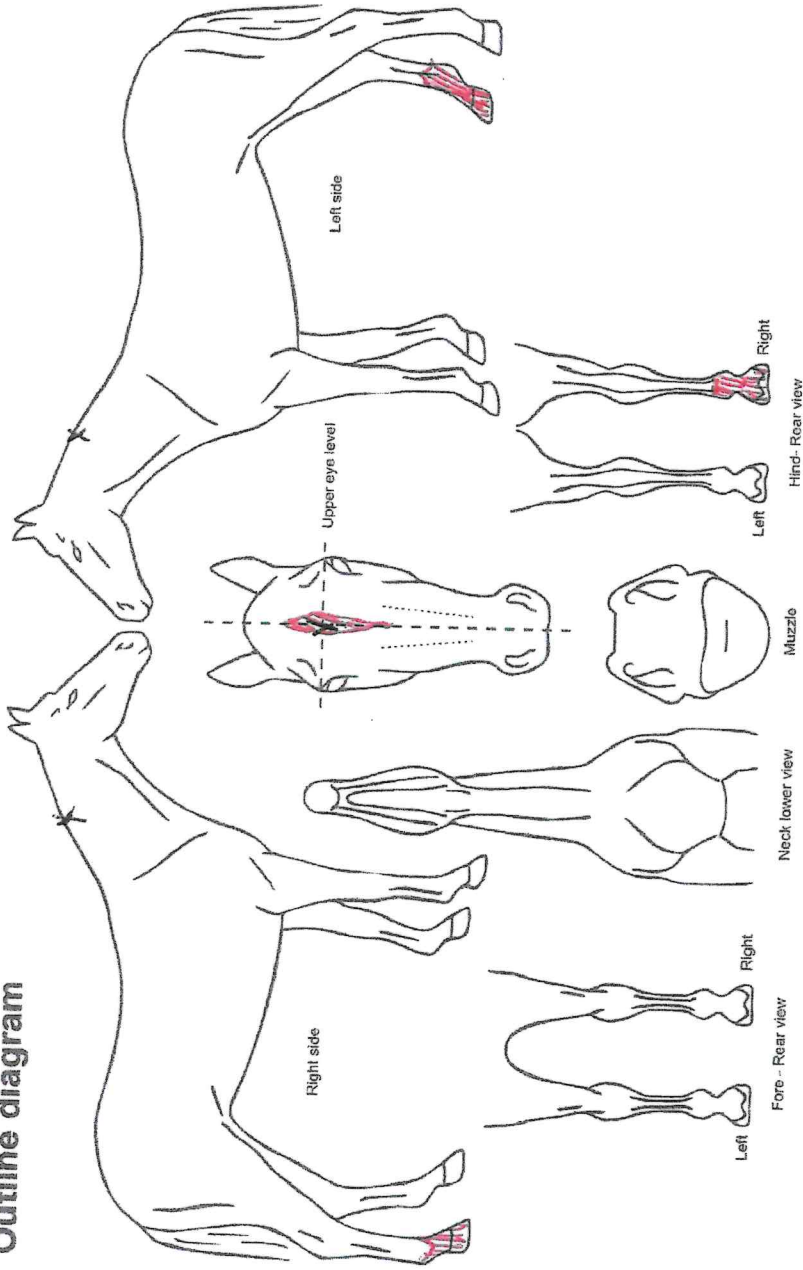
Practice _____

Date _____

RETURN TO: PHILNA HATTINGH FAX: 051-4473964
SA STUD BOOK ASSOCIATION, P.O. BOX 270, BLOEMFONTEIN, 9300

SEX	COLOR	DATE OF BIRTH (DD/MM/YYYY)	SIRE	DAM	REGISTERED NAME
MARE	BLACK	± 2013	UNKNOWN	UNKNOWN	SHIFFON

Outline diagram



WRITTEN DESCRIPTION OF MARKINGS:

HEAD: UPPER EYE LEVEL WHORL IN STAR AND CONNECTED STRIPE ENDING TOWARDS MIDDLE OF THE FACE
MID CREST WHORL ON BOTH SIDES

LEFT FORE	NIL
RIGHT FORE	NIL
LEFT HIND	NIL
RIGHT HIND	FETLOCK WITH WHITE HOOF

BODY / WHORLS
NIL

MICROCHIP STICKER

NAME OF VETERINARIAN

JW WESSELS

SIGNATURE OF VETERINARIAN

[Signature]

DATE 6 / 4 / 2022

PRACTICE STAMP

JW WESSELS
Heidelberg Diereklínik

ACQUIRED (BRAND/FREEZE MARKS OR PERMANENT SCARS)

APPLICATION FOR HORSE PASSPORT
Registered Horse & Non Registered Horse



SA STAMBOEK
STUD BOOK

OWNER'S DETAILS

Name of owner	JAN-HENDRIK JOUBERT		
ID number	830326 5016 08 9		
Member number	0705690 NON		
Address of owner	UITKYK		
	RIVERSDAL	Postal code	6670
Telephone	082 322 6638	E-mail	
Fax			

HORSE DETAILS

Name of horse	Prefix		Name	SNIP	
Registration Number of horse	13392592	BIRTH DATE	± 2002	BREED	SA BOERPERD
RF ID Implant / Micro Chip Number	Yes / No	NO	Type of implant		
If yes, please supply number of code					

VACCINATION DETAILS

Date of two most recent Equine Influenza Vaccinations	Name & Batch No. of Vaccine	Name of person who administered Influenza Vaccine
Date of two most recent African Horse Sickness Vaccinations	Name & Batch No. Of Vaccine	Name of person who administered African Horse Sickness Vaccine

CERTIFIED BY VETERINARIAN – (SIGNED AND STAMPED)

I confirm that this horse received the African Horse Sickness vaccinations on the date stated on this form.

Signature

Practice

Date

RETURN TO: PHILNA HATTINGH FAX: 051-4473964
SA STUD BOOK ASSOCIATION, P.O. BOX 270, BLOEMFONTEIN, 9300

SEX	COLOUR	DATE OF BIRTH (DD/MM/YYYY)	SIRE	DAM	REGISTERD NAME
MARE	ROSE GREY	5.2.2002	UNKNOWN	UNKNOWN	SNIP

Outline diagram	MICROCHIP STICKER
	NAME OF VETENARIAN JW WESSELS
	SIGNATURE OF VETENARIAN <i>[Signature]</i>
	DATE 6.4.2022 PRACTICE STAMP JW WESSELS Heidelberg Dierekliniek

WRITTEN DESCRIPTION OF MARKINGS:
HEAD: MEDIAN WHORL BELOW EYE LEVEL IN STR AND STRIDE ENDING IN MUZZLE AFTER RUNNING INTO BOTH NOSTRILS

LEFT FORE	NIL	BODY / WHORLS
RIGHT FORE	NIL	BOERPERD BRAND ON RIGHT
LEFT HIND	NIL	GRISKIN
RIGHT HIND	NIL	

ACQUIRED (BRAND/FREEZE MARKS OR PERMANENT SCARS) BOERPERD BRAND ON RIGHT GRISKIN