

Philna Moelich

From: elize@studbook.co.za
Sent: 16 September 2022 10:04 AM
To: 'Philna Moelich'
Subject: RE: FRIESPERED : Aansoeke 08/09/2022

AM 00

Hallo,

8x paspoorte

Jy kan die volgende passpoorte solank ook uitreik van Doornkop Stoet / Sias Horn:

1. Sianda Calsey - *SB9076 Gb*
2. Ifina K.W – 12956751 - *SB9077 Reg*
3. HEIKE FAW E SALEAN - *SB9078 Reg*

Doornkop Truke se DNA wag ons nog voor , sal jou laat weet as dit afgehandel is.

Groete

From: elize@studbook.co.za <elize@studbook.co.za>
Sent: Monday, 12 September 2022 15:49
To: 'Philna Moelich' <philna@studbook.co.za>
Cc: HORN, SIAS <Siashorn44@gmail.com>
Subject: FRIESPERED : Aansoeke 08/09/2022

Hello Philna,

Ek antwoord jou graag op jou navrae:

1. Sianda Calsey – is in Mnr Sia Horn se naam : Sianda SA Boerperd Stoet
2. Doornkoop Truke – ek het ook nie so perd op die stelsel nie – Sias kan jy hier help asseblief
3. Ifina K.W – 12956751 is in die besit van Casper Badenhorste – Sias het jy oordrag opdrag vir my dalk?
4. HEIKE FAW E SALEAN - 12956744 is in die besit van Casper Badenhorste – Sias het jy oordrag opdrag vir my dalk?

Sias wie betaal die paspoorte en courier kostes?

Vriendelike Groete

From: Philna Moelich <philna@studbook.co.za>
Sent: Monday, 12 September 2022 15:45
To: Elize Prinsloo <elize@studbook.co.za>

Cc: 'HORN, SIAS' <Siashorn44@gmail.com>

Subject: FW: Aansoeke 08/09/2022

Goeie middag Elize

Ek het die volgende paspoort aansoeke ontvang vanaf Stilbaai Dierekliniek vir Meneer Horn.

Hier is net n paar waarop ek navrae het.

SIANDA CALSEY – 13380878 is in n ander persoon se besit

DOORNKOP TRUKE – Kry ek nie opgespoor op die stelsel met die naam nie

IFINA K.W. 12956751 – Die perdjie is ook nog in iemand anders se naam lyk dit vir my.

HEIKE FAW E SALEAN 12956744 – Die perdjie is ook nog in iemand anders se naam.

Baie dankie vir jou hulp.

Kind regards / Groete



Philna Moelich

Admin Clerk: Participation Administration, Passports

E philna@studbook.co.za P +27 51 410 0910

LOGIX

South African Stud Book and Animal Improvement Association

118 Henry Street, Westdene, Bloemfontein, South Africa



www.StudBook.co.za | www.LOGIX.org.za | www.SADairyBulls.co.za | www.SABeefBulls.co.za

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From: Stilbaai Dierekliniek [<mailto:stilbaaid@gmail.com>]

Sent: 08 September 2022 11:30 AM

To: Philna Moelich <philna@studbook.co.za>

Subject: Re: Aansoeke 08/09/2022

On Thu, Sep 8, 2022 at 10:34 AM Philna Moelich <philna@studbook.co.za> wrote:

Goeie dag Hanri

Baie dankie. Ek neem dan aan hulle moet ook vir die koerier betaal? Dit sal waarskynlik na julle toe moet gaan vir inentings?

Hier was net geen aanhegsel by die epos gewees nie.

Lekker dag vir jou

Kind regards / Groete



Philna Moelich

Admin Clerk: Participation Administration, Passports

E philna@studbook.co.za P +27 51 410 0910

LOGIX

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From: Stilbaai Dierekliniek [<mailto:stilbaaid@gmail.com>]

Sent: 08 September 2022 09:42 AM

To: Philna Moelich <philna@studbook.co.za>

Subject: Aansoeke 08/09/2022

Goeie môre Philna, ek hoop dit gaan goed?

Vind asseblief aangeheg 3x aansoeke vir Elsabe Horn en 9x aansoeke vir Sias Horn.

Jy sal sien van die perde se inligting kort, jy kan asb net dit by Elsabe kry en hulle gaan julle direk betaal vir die paspoorte so julle kan net vir hulle direk die faktuur aanstuur en nie vir ons nie.

elsabehorn466@gmail.com / 082 926 1116

siashorn44@gmail.com / 082 337 2160

Groete

Hanri

Stilbaai Dierkliniek

APPLICATION FOR HORSE PASSPORT
Registered Horse & Non Registered Horse



SA STAMBOEK
STUD BOOK

OWNER'S DETAILS

Name of owner	Sias Horn (Doornkop Stoet)		
ID number	7007 24 50 23 088		
Member number	56 22 46		
Address of owner	Postbus 690		
	Shellendam	Postal code	6740
Telephone	082 337 2160	E-mail	SiasHorn44@gmail.com
Fax	—		

HORSE DETAILS

Name of horse	Prefix		Name	Perdeprag Yvette
Registration Number of horse	12673018	BIRTH DATE	BREED	Friesian
RF ID Implant / Micro Chip Number	Yes / No	Yes	Type of implant	
If yes, please supply number of code	477 1125 898			

VACCINATION DETAILS

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

CERTIFIED BY VETERINARIAN – (SIGNED AND STAMPED)

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

Bou
Signature

Stilbaai Dierkliniek
Practice

25/08/2022
Date

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

SEX	CLOUR	DATE OF BIRTH (DD/MM/YYYY)	SIRE	DAM	REGISTERED NAME
MARE	BLACK				PERDEPAC YVETTE

Outline diagram	MICROCHIP STICKER 4771125858 NAME OF VETERINARIAN Pierre du Boulay SIGNATURE OF VETERINARIAN <i>Pierre du Boulay</i> DATE 25/08/2012 PRACTICE STAMP Dr Pierre du Boulay Stilbaai Dierkliniek 026 754 1834 Postbus 412, Riversdal
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WRITTEN DESCRIPTION OF MARKINGS:

HEAD: Neck wheel at eye level. Muzzle wheel.

LEFT FORE	Nil	BODY / WHORLS
RIGHT FORE	Nil	- Lt and Rt poll whorls
LEFT HIND	Nil	- Lt and Rt flank whorls
RIGHT HIND	Nil	

ACQUIRED (BRAND/FREEZE MARKS OR PERMANENT SCARS) Nil

APPLICATION FOR HORSE PASSPORT
Registered Horse & Non Registered Horse



SA STAMBOEK
STUD BOOK

OWNER'S DETAILS

Name of owner	Sigg Horn (Dooinkop Street)		
ID number	7007 24 50 23 088		
Member number	56 22 46 (0561123)		
Address of owner	posbus 690	Postal code	6740
	Snellendam	E-mail	SiggHorn44@gmail.com
Telephone	082 331 2160		
Fax	—		

HORSE DETAILS

Name of horse	Prefix	Name	
		Sianda Calsey	
Registration Number of horse	13380878	BIRTH DATE	BREED
		23/03/2021	Borpe Friesian
RF ID Implant / Micro Chip Number	Yes / No	Type of implant	
	Yes		
If yes, please supply number of code	98 51 41000 910 714		

VACCINATION DETAILS

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

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]
Signature

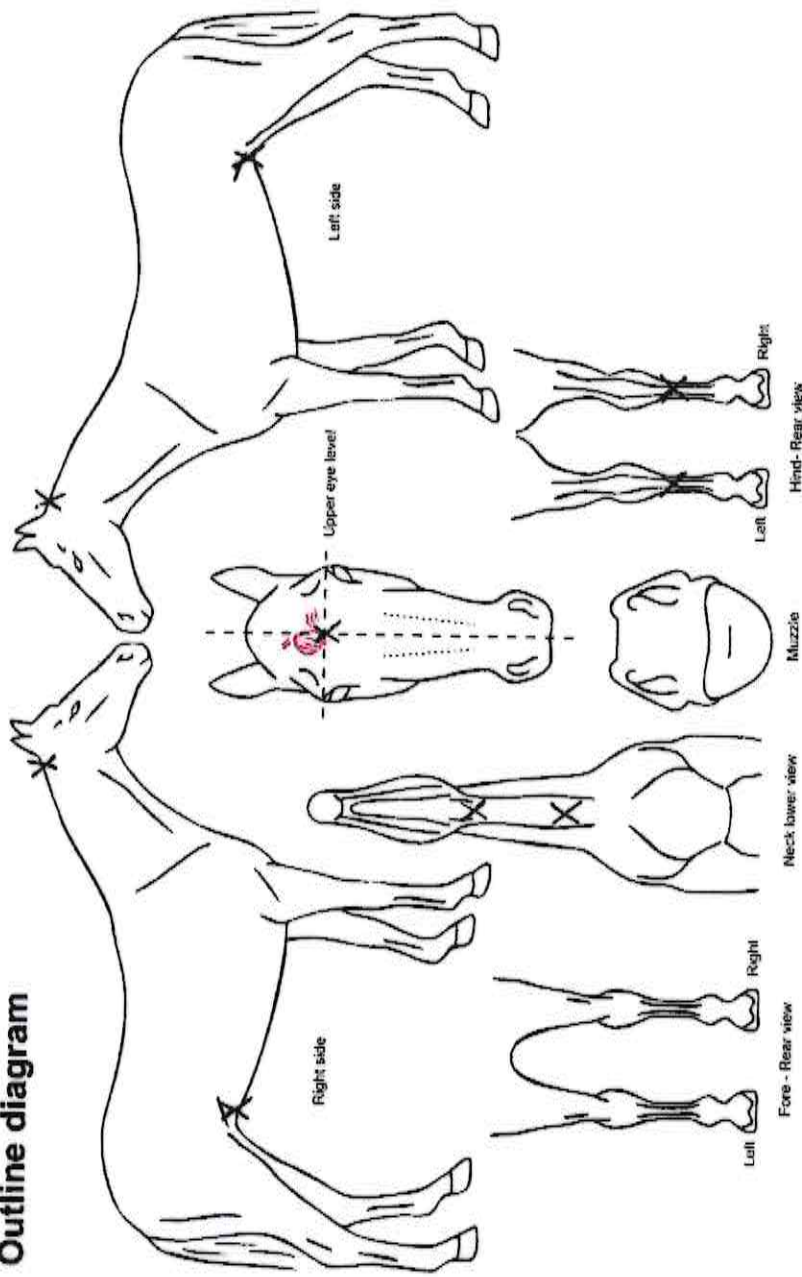
Stilberg Dierckx
Practice

25/05/2022
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	REGISTERED NAME
Filly	Bay	23/03/2021	STANDA CASINO	Vierkleur	STANDA CALSEY

Outline diagram



NAME OF VETERINARIAN

Pierre du Bray

SIGNATURE OF VETERINARIAN

Pierre du Bray

DATE 25/08/2022

PRACTICE STAMP

Dr Pierre du Bray
Stilbaai Dierotroef
028 754 1334
Posbus 412, Riversdal

MICROCHIP STICKER

985141000910719

WRITTEN DESCRIPTION OF MARKINGS:

HEAD: Oval shaped star off set to Rt of midline and above median whorl at upper eye level. Ticking around star.

LEFT FORE	Nil
RIGHT FORE	Nil
LEFT HIND	Nil
RIGHT HIND	Nil

BODY / WHORLS

- Lt and Rt high crest whorls.
- Front whorl
- Low ventral neck whorl
- Lt and Rt low flank whorls
- Whorl at the back of Lt and Rt hind quarters

ACQUIRED (BRAND/FREEZE MARKS OR PERMANENT SCARS) Nil

APPLICATION FOR HORSE PASSPORT
Registered Horse & Non Registered Horse



SA STAMBOEK
STUD BOOK

OWNER'S DETAILS

Name of owner	Sids Horn (Doornkop Steel)		
ID number	7007 24 5023 088		
Member number	56 22 47		
Address of owner	Posbus 690	Postal code	6740
	Snellendam	E-mail	SidsHorn44@gmail.com
Telephone	082 337 2160		
Fax	—		

HORSE DETAILS

Name of horse	Prefix		Name	Arra Iize
Registration Number of horse	12 835 781	BIRTH DATE	17/11/2009	BREED
				Friesian
RF ID Implant / Micro Chip Number	Yes / No	Yes	Type of implant	
If yes, please supply number of code	452 706 5217			

VACCINATION DETAILS

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

CERTIFIED BY VETERINARIAN – (SIGNED AND STAMPED)

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

Bon
Signature

Stilhou, Dierkliniek
Practice

25/08/2022
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	REGISTERED NAME
Mare	Black	17/11/2009	MARKUS T	IMHOFF LADY-DI	ARRA ILZE

Outline diagram

MICROCHIP STICKER

452 706 5217

NAME OF VETERINARIAN

Pierre du Boys

SIGNATURE OF VETERINARIAN

Pierre du Boys

DATE 25/08/2022

PRACTICE STAMP

Dr Pierre du Bruyn
Sulbaai Dierkliniek
028 754 1834
Posbus 412, Riversdal

WRITTEN DESCRIPTION OF MARKINGS:
HEAD: Ticking at forehead. Medians wheel at lower eye level. Muzzle wheel.

LEFT FORE	Nil
RIGHT FORE	Nil
LEFT HIND	Nil
RIGHT HIND	Nil

BODY / WHORLS
- Throat wheel
- Lower-ventral neck wheel with feathering extending upwards
- Lt hind crest wheel
- Rt hind crest wheel
- Wheel at the back of Lt and hind cannons

ACQUIRED (BRAND/FREEZE MARKS OR PERMANENT SCARS) Nil

APPLICATION FOR HORSE PASSPORT
Registered Horse & Non Registered Horse



SA STAMBOEK
STUD BOOK

OWNER'S DETAILS

Name of owner	Sias Horn (Doornkop stoet)		
ID number	7007 24 5023 088		
Member number	56 22 46		
Address of owner	Posbus 690 Snellendam		Postal code 6740
Telephone	082 337 2160	E-mail	SiasHorn44@gmail.com
Fax	—		

HORSE DETAILS

Name of horse	Prefix	Name		Doornkop Truke
Registration Number of horse	BIRTH DATE 29/11/2013		BREED	Friesian
RF ID Implant / Micro Chip Number	Yes / No	YES	Type of implant	
If yes, please supply number of code	95 301 00 00 44 3000			

VACCINATION DETAILS

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

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

Stilhouw Dierkliniek
Practice

25/08/2012
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	REGISTERED NAME
Male	Black	25/11/2013	THICK K	TRUKE IMPORTED	DOORUKOP TRUKE

Outline diagram

MICROCHIP STICKER
953010000443000

NAME OF VETERINARIAN
Pierre du Bruyn

SIGNATURE OF VETERINARIAN
Pierre du Bruyn

DATE 25/08/2022

PRACTICE STAMP
Dr Pierre du Bruyn
Stilbaai Dierkliniek
028 754 1834
Posbus 412, Riversdal

WRITTEN DESCRIPTION OF MARKINGS:

HEAD: Forelock whorl - Median whorl at lower eye level.

LEFT FORE	Nil
RIGHT FORE	Nil
LEFT HIND	Nil
RIGHT HIND	Nil

BODY / WHORLS

- Lt and Rt Poll whorl
- Feather mid-ventral
- Neck extending down
- Lt and Rt Flank whorls

ACQUIRED (BRAND/FREEZE MARKS OR PERMANENT SCARS) Nil

APPLICATION FOR HORSE PASSPORT
Registered Horse & Non Registered Horse



SA STAMBOEK
STUD BOOK

OWNER'S DETAILS

Name of owner	Sivis Horn (Doornkop Stoet)		
ID number	7007 24 50 23 088		
Member number	56 22 46		
Address of owner	POSBUS 690		
	Swellendam	Postal code	6740
Telephone	082 337 2160	E-mail	Sivishorn44@gmail.com
Fax	—		

HORSE DETAILS

Name of horse	Prefix		Name	Arra Haitze
Registration Number of horse	12728952	BIRTH DATE	12/01/2009	BREED
				Friesian
RF ID Implant / Micro Chip Number	Yes / No	Yes	Type of implant	
If yes, please supply number of code	4 A 5 A 5 3 4 8 7 0 ✓			

VACCINATION DETAILS

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

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]
Signature

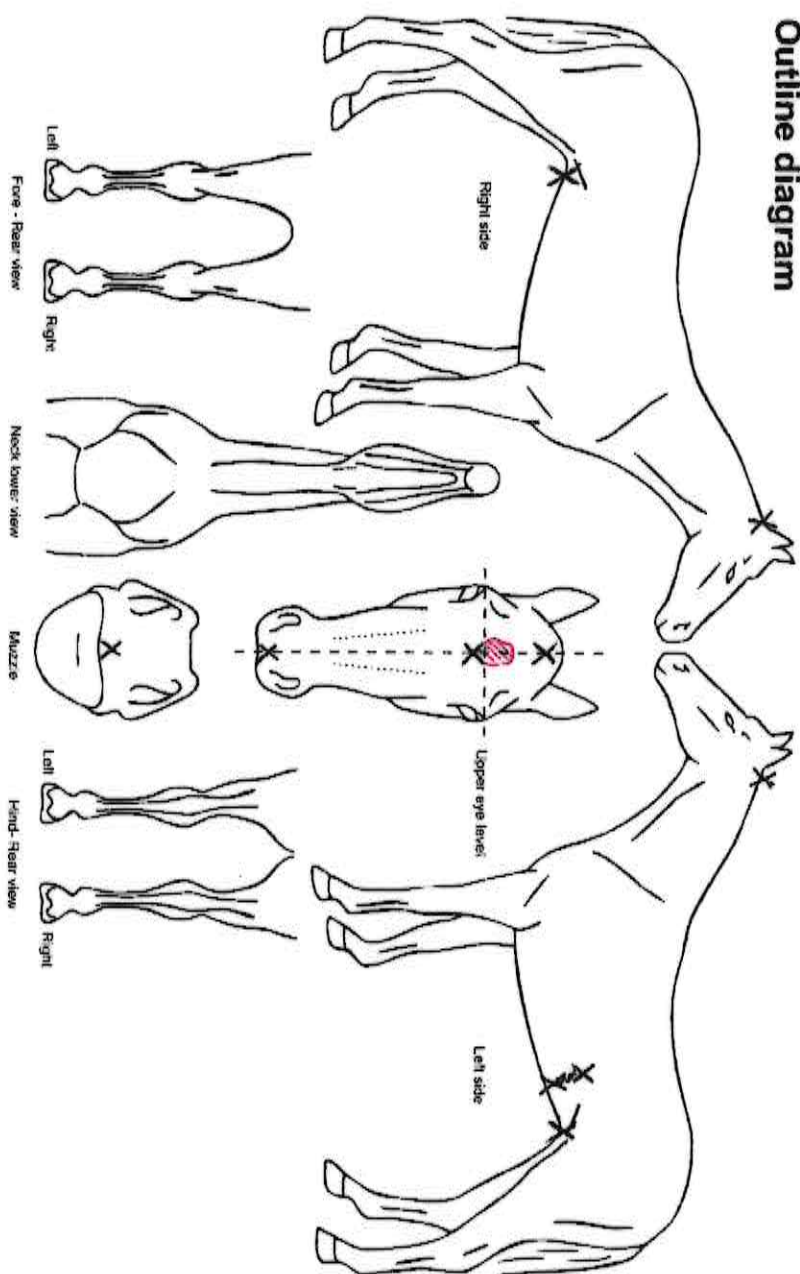
Stiliana Dreckelnieh
Practice

25/08/2022
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	REGISTERED NAME
		12/01/2009	ITHOFF RILMER	MOCROU MIDNIGHT	ARRA HAITZE

Outline diagram



WRITTEN DESCRIPTION OF MARKINGS:

HEAD: Forelock whorl. Median whorl at eye level. Oval shaped scar between forehead whorl and median whorl. Muzzle whorl.

LEFT FORE	N.I.
RIGHT FORE	N.I.
LEFT HIND	N.I.
RIGHT HIND	N.I.

MICROCHIP STICKER

LA5A534570

NAME OF VETERINARIAN

Pierre du Bryn

SIGNATURE OF VETERINARIAN

Pierre du Bryn

DATE 25/05/2022

PRACTICE STAMP

Dr Pierre du Bryn
Stibaani Diereklintek
028 754 1834
Postbus 412, Riversdal

BODY / WHORLS

- 1st and 2nd poll whorl.
- 1st and 2nd lower flank whorl.
- Two 1st lateral abdominal whorls one above the other connected with feathering.

ACQUIRED (BRAND/FREEZE MARKS OR PERMANENT SCARS)

N.I.

APPLICATION FOR HORSE PASSPORT
Registered Horse & Non Registered Horse



SA STAMBOEK
STUD BOOK

OWNER'S DETAILS

Name of owner	Sids Horn (Doornkop Steel)		
ID number	7007 24 50 23 098		
Member number	56 22 47		
Address of owner	Posbus 690 Mellendam		
	Postal code	6740	
Telephone	082 337 2160	E-mail	SidsHorn44@gmail.co
Fax	—		

HORSE DETAILS

Name of horse	Prefix	Name		Arnd Gerty	
Registration Number of horse	12588356	BIRTH DATE	18/10/2007	BREED	Friesian
RF ID Implant / Micro Chip Number	Yes / No	Yes	Type of implant		
If yes, please supply number of code	495 A094 F24				

VACCINATION DETAILS

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

CERTIFIED BY VETERINARIAN – (SIGNED AND STAMPED)

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

Ban
Signature

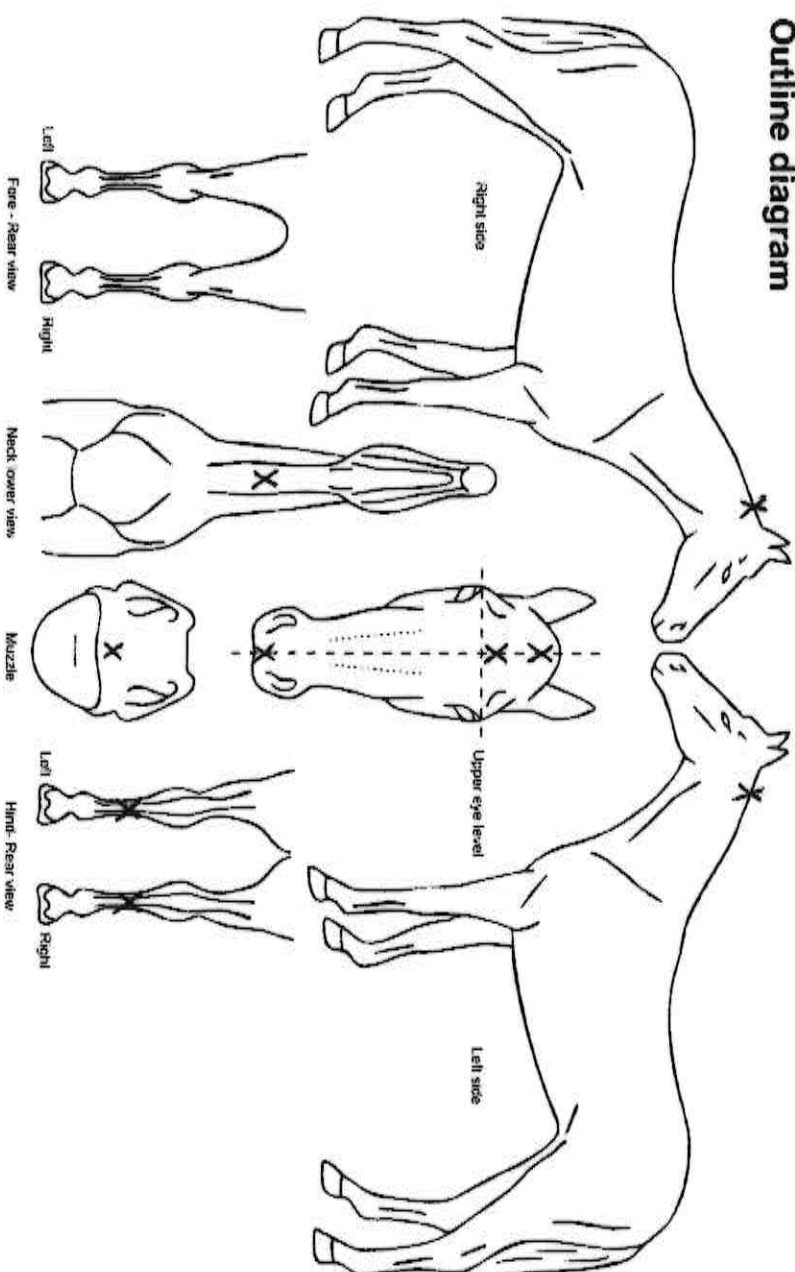
Stillemare Vee kliniek
Practice

25/08/2022
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	REGISTERED NAME
MALE	BLACK	18/10/2007	MOOIBOU BRITS	ORPHEE PAISY	ARPA GERTY

Outline diagram



WRITTEN DESCRIPTION OF MARKINGS:

HEAD: Forelock wheel. Median wheel above upper eye level. Muzzle wheel.

LEFT FORE	N.I.
RIGHT FORE	N.I.
LEFT HIND	N.I.
RIGHT HIND	N.I.

MICROCHIP STICKER

L95A094F29

NAME OF VETERINARIAN

Pierre du Braye

SIGNATURE OF VETERINARIAN

Pierre du Braye

DATE 25/08/2022

PRACTICE STAMP

Dr Pierre du Braye
Stibbaal Dierkliniek
028 754 1834
Postbus 412, Riverdahl

BODY / WHORLS

- Lt and Rt high crest
- 4 whorls
- 1 whorl ventral neck whorl
- 1 whorl at the back of
- Lt and Rt hind cannon

ACQUIRED (BRAND/FREEZE MARKS OR PERMANENT SCARS) N.I.

APPLICATION FOR HORSE PASSPORT
Registered Horse & Non Registered Horse



SA STAMBOEK
STUD BOOK

OWNER'S DETAILS

Name of owner	Sids Horn (Doornkop Stoet)		
ID number	7007 24 50 23 088		
Member number	56 22 47 0601935		
Address of owner	Posbus 690 Schellendam	Postal code	6740
Telephone	082 337 2160	E-mail	Sid1horn44@gmail.com
Fax	—		

HORSE DETAILS

Name of horse	Prefix	Name	
		Ifing K.V. [IMP]	
Registration Number of horse	12956751	BIRTH DATE	BREED
		12/06/2010	Friesian
RF ID Implant / Micro Chip Number	Yes / No	Type of implant	
	yes		
If yes, please supply number of code	52 82 1000 23 94 806 ✓		

VACCINATION DETAILS

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

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

Stilhouw Dierkliniek
Practice

25/08/2022
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	REGISTERED NAME
MARE	BLACK	12/06/2010	DOATSEN	AMARINS	IFINA K.W. [Imp]

Outline diagram

MICROCHIP STICKER
528210002394806

NAME OF VETERINARIAN
Pierre du Bruyn

SIGNATURE OF VETERINARIAN
Pierre du Bruyn

DATE 25/08/2022

PRACTICE STAMP
Dr Pierre du Bruyn
Stillebaai Dierekliniek
028 754 1034
Postbus 412, Riversdal

WRITTEN DESCRIPTION OF MARKINGS:
HEAD: Forelock whorl. Median whorl at upper eye level. Muzzle whorl. Small, elongated star mid-very between forelock whorl and median whorl at upper eye level.

LEFT FORE	Nil
RIGHT FORE	Nil
LEFT HIND	Nil
RIGHT HIND	Nil

BODY / WHORLS
- Forelock whorl.
- Lt high-crest whorl
- Rt mid-crest whorl
- Lt irregular whorl.
- Lt small ft low-flank whorls.

ACQUIRED (BRAND/FREEZE MARKS OR PERMANENT SCARS) Nil

APPLICATION FOR HORSE PASSPORT
Registered Horse & Non Registered Horse



SA STAMBOEK
STUD BOOK

OWNER'S DETAILS

Name of owner	Sigis Horn (Doornkop Sleet)		
ID number	7007 24 5023 088		
Member number	56 22 47		
Address of owner	POSBUS 670		
	Wellendam	Postal code	6740
Telephone	082 337 2160	E-mail	Sigishorn44@gmail.com
Fax	—		

HORSE DETAILS

Name of horse	Prefix	Name	
		Mooibou Rick	
Registration Number of horse	12473658	BIRTH DATE	BREED
		13/11/2005	Friesian
RF ID Implant / Micro Chip Number	Yes / No	Type of implant	
	Yes		
If yes, please supply number of code	46610 77644		

VACCINATION DETAILS

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

CERTIFIED BY VETERINARIAN – (SIGNED AND STAMPED)

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

Ban
Signature

Stillem Dreukliniek
Practice

25/05/2022
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	REGISTERED NAME
MARE	BLACK	13/11/2005	IMHOFF RIEMER 2	SUHAN TRAPNET	MOOTBOU RISKA

Outline diagram	MICROCHIP STICKER 46610 77644
	NAME OF VETERINARIAN Pierre du Bruyn
	SIGNATURE OF VETERINARIAN <i>Pierre du Bruyn</i>
	DATE 25/08/2022 PRACTICE STAMP Dr Pierre du Bruyn Stilbaai Dierekliniek 028 754 1834 Posbus 412, Riversdal

WRITTEN DESCRIPTION OF MARKINGS:
HEAD: Forelock whorl. Median whorl at upper eye level. Muzzle whorl. Oval shaped star immediately above median whorl at upper eye level. Ticking around star.

LEFT FORE	Nil	BODY / WHORLS
RIGHT FORE	Nil	- Throat whorl.
LEFT HIND	Nil	- Lt and Rt high scapular whorls connected with each other and throat whorl with feathering.
RIGHT HIND	Nil	

ACQUIRED (BRAND/FREEZE MARKS OR PERMANENT SCARS) Nil

APPLICATION FOR HORSE PASSPORT
Registered Horse & Non Registered Horse



SA STAMBOEK
STUD BOOK

OWNER'S DETAILS

Name of owner	Sida G Horn (Doornkop Street)		
ID number	7007 24 5023 088		
Member number	56 22 47 0601935		
Address of owner	PO Box 1 690 Jwellendam		Postal code 6740
Telephone	082 337 2160	E-mail	SidaHorn44@gmail.com
Fax	—		

HORSE DETAILS

Name of horse	Prefix	Name	
		Heike FAN E SALAN [IMP]	
Registration Number of horse	12956744	BIRTH DATE 23/06/2010	BREED Friesian
RF ID Implant / Micro Chip Number	Yes / No	yes	Type of implant
If yes, please supply number of code	5282 1000 23 87 999		

VACCINATION DETAILS

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

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

Stilbaai Dierkliniek
Practice

25/08/2022
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	REGISTERED NAME
MARE	BLACK	23/06/2010	BEART	WEIKE VAN'E SÁLEAN	HEIKE FAN'E SÁLEAN [IMP]

Outline diagram		MICROCHIP STICKER S28210002387999
NAME OF VETERINARIAN Pierre du Bruyn		SIGNATURE OF VETERINARIAN
DATE 25/08/2022		PRACTICE STAMP Dr Pierre du Bruyn Stillebaai Dierkliniek 028 754 1834 Poshus 412, Riversdal

WRITTEN DESCRIPTION OF MARKINGS:
HEAD: Forelocks whorl, whorl to Pt of midline of upper eye level, Muzzle whorl.

LEFT FORE	Nil	BODY / WHORLS
RIGHT FORE	Nil	- Lt and Rt tail whorls.
LEFT HIND	Nil	- Hips - and mid-ventral neck whorls connected with feathering.
RIGHT HIND	Nil	- Central chest whorl.
		- Lt and Rt low-flank whorls.

ACQUIRED (BRAND/FREEZE MARKS OR PERMANENT SCARS) Nil