



**CANADIAN FARM INSURANCE CORP. o/a**

**LIVESTOCK INSURANCE MANAGERS**

210 – 3502 Taylor Street East

Saskatoon, SK S7H 5H9

TEL: 306-244-8181 FAX: 306-244-8183

**PROFESSIONAL EQUINE JUSTIFICATION OF VALUE DECLARATION**

To be completed by an Unbiased 3<sup>rd</sup> Party - Trainer or Breeder

Name of Owner \_\_\_\_\_ Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Name of Horse: \_\_\_\_\_ Policy#: \_\_\_\_\_

PURCHASE DATE: \_\_\_\_\_ PURCHASE VALUE: \$ \_\_\_\_\_ DECLARED VALUE: \$ \_\_\_\_\_

If Home Raised: Stud Fee \$ \_\_\_\_\_ Training Fees: \$ \_\_\_\_\_

USE OF HORSE: \_\_\_\_\_

Current level \_\_\_\_\_

Of Training: \_\_\_\_\_

Name of Trainer/Coach/Breeder: \_\_\_\_\_

Phone Number \_\_\_\_\_ Email: \_\_\_\_\_

Qualifications: \_\_\_\_\_

Name of Competitions: \_\_\_\_\_ Wins/Show Results: \_\_\_\_\_

Names of Scheduled Shows/ Competitions \_\_\_\_\_

Number of Mares Bred in the Past Year \_\_\_\_\_ Number of Offspring \_\_\_\_\_

**DECLARATION**

It is my professional opinion that the horse \_\_\_\_\_ owned by \_\_\_\_\_ has a current fair market value of \$ \_\_\_\_\_ for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_

Signature of Professional \_\_\_\_\_

Printed Name of Professional \_\_\_\_\_

Dated: \_\_\_\_\_