



Justification of Value Record

Show/Pleasure/Breeding & In-Training Horses Yearling / Other Uses

PO Box 868
DeLeon Springs, FL 32130
(800) 572-3286 Fax: (386) 985-4657

Agent: Mary Phelps, A Markel Equine Insurance Specialist

Insured's Name:	
Name of Horse:	Date of Birth:

Breeding Record of Mare				
List Sires	Years Foaled	Stud Fees	Foal Sex	Price When Sold
1.		\$		\$
2.		\$		\$
3.		\$		\$

Number of Foals Produced: _____

Breeding Record of Stallion <i>(List for three years beginning with third year prior to present.)</i>					
Year	Outside Mares Bred	Stud Fees Earned	Homebred Mares Bred	Income From Sales of Foals	# of Foals Produced
	#	\$	#	\$	#
	#	\$	#	\$	#
	#	\$	#	\$	#

Total Number of Foals Produced: _____

Coming Year Mares Booked: _____ Stud Fee Charges: \$ _____ / \$ _____

Comments: _____

Training Record

Total cost of training in horse excluding board: \$ _____

Type of Training: _____

Comments: _____

Signed:	Date:
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Substantiation of Value

Showing

Agent: Mary Phelps, A Markel Equine Insurance Specialist

Insured's Name:	
Name of Horse:	Date of Birth:
Sire / Dam:	
Trainer & Location:	
Cost of Training Per Month (Excluding Boarding):	Total Number of Months in Training To Date:

Show Information for Prior 12 Months

Name of Show & Rating	Date	Name of Class or Division	Number of Entries	Placing

Additional Information / Comments to Support Value

I, the undersigned, declare that to the best of my knowledge and belief the above statements are true and complete and that I have not withheld any material information. I further declare that no insurer has declined or refused to renew my bloodstock insurance, and that there are no other circumstances within my knowledge not already disclosed which might affect the proposed insurance.

Signed:	Date:
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