

If found return to: United Saddlebred Association



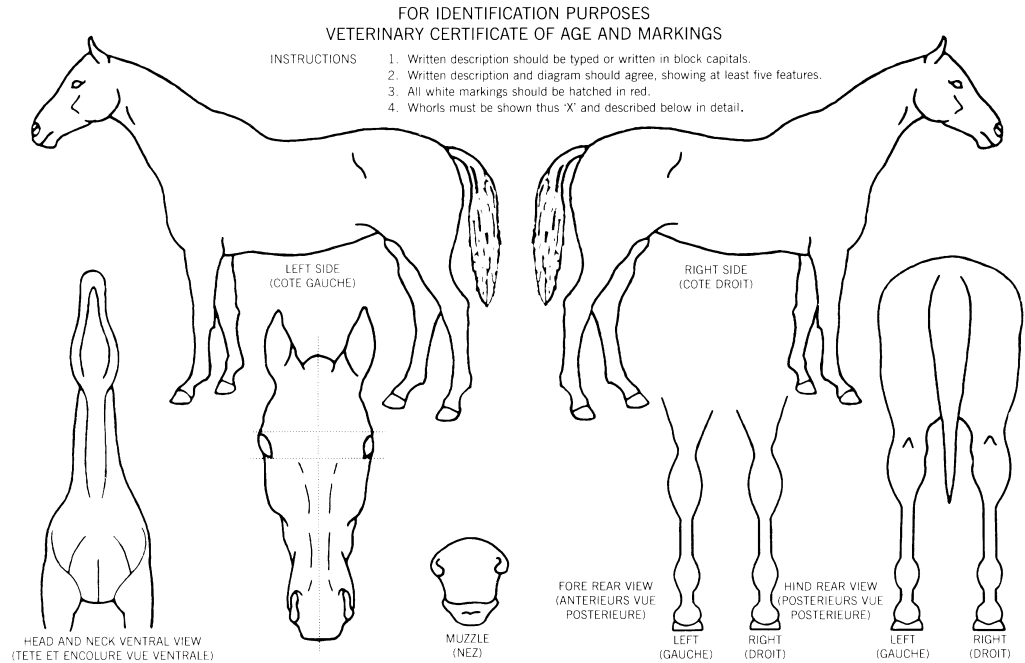
**GRADING (MARES & STALLIONS) &
STALLION LICENCING FORM**

GRADING CERTIFICATE & USA-UK Licencing

IDENTIFICATION

To be completed by Veterinary Surgeon nominated by the Owner

Name of Horse	Breed / Type	Colour	Date of Birth



- Instructions:**
1. Written descriptions should be in block capitals.
 2. Written descriptions and diagrams should agree.
 3. All markings should be hatched in red
 4. Whorls must be shown thus 'X' and described below in detail.

Head

Neck

Limbs LF

RF

LH

RH

Body

Acquired Marks/Brands:

Height: (Hands) (cms) With/Without shoes

Bone: (Inches) (cms)

Girth: (Inches) (cms)

The Property of (Name & Address):

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At (Place of Examination): Date

The examination is carried out substantially in accordance with the standard procedure recommended by the R.C.V.S and the B.V.A. (Joint Memorandum on the Examination of Horses 1976 revised 1985). The examination is set out in three stages:

1. Preliminary examination.
2. In-hand exercise.
3. Strenuous exercise.
4. Period of rest.
5. Second trot up and foot examination.

Evidence of any disease or defect should be assessed with regard to these permanently rendering the animal unsuitable for breeding. Each animal should be qualified with pertinent comments. "Satisfactory" is acceptable as a minimal opinion.

1. Preliminary Examination

a. Conformation: The Conformation is entirely a matter for the breed society. However, conformation which is potentially deleterious or detrimental to athletic ability or durability should be recorded and discussed. The general appearance and conformation on veterinary grounds will be studied; e.g. narrow feet, flat soles, pigeon toes and vice versa, cow and sickle hocks and angular deformities of the limbs.

b. Head To include Mouth - Malformation of the teeth and jaws; e.g. parrot mouth.
Eyes - Maldevelopment of the lens, iris or retina. Cataract.

c. Neck

d. Limbs To include: Narrow or flat feet, ringbone, sidebone, navicular disease. Allowances will be made when the cause is an obvious injury.

LF

RF

LH

RH

e. Body To include: Evidence of being permanently affected with any contagious or infectious disease.

f. Genitalia Testicular size, texture and degree of descent. Both testicles must be capable of full descent into the scrotum and their sizes should not vary greater than 10%. There should be no evidence of cryptorchidism inguinal hernia.

2. In-Hand Exercise

Study of action at walk, trot, turning and backing and look for evidence of stringhalt, shivering, upward fixation of the patella.

Action at the walk and trot on a hard level surface

Turning in the horse's own length and trotting away

Backing

Distal limb flexion tests

3. Strenuous Exercise

Action at the walk, trot and canter on the lunge or under saddle on both reins. The exercise must be strenuous enough to exert the horse's cardio-vascular and locomotor systems within the limit of fitness. There should be no evidence of laryngeal hemiplagia (whistling / roaring), Wobbler disease or pharyngeal dysplasia or of surgical correction for these. Assess evidence for being affected with any disease or defect rendering the animal unsuitable for breeding purposes.

4. Period of rest

Observation for the presence of stereotypic behaviour (vices) and other temperamental problems. Observation of stance in box. Heart rate and respiratory recovery times.

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5. Second Trot up and Foot Examination

Note. This external examination does not include any special techniques other than:

- i. Blood typing/DNA typing.
- ii. Blood samples for non-normal nutrients.

At the examining veterinary surgeon's request other special techniques such as endoscopy, radiography, ultrasonography and haematological examinations may be used.

Special techniques and findings performed:

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I found no clinical signs of disease, injury of physical abnormality which may render the above horse permanently unsuitable for stud purposes other than recorded above. In my opinion this horse is clinically free from conformation defects currently thought to be hereditary. This clinical examination is not such as to determine this horse's athletic ability and durability with particular regard to such diseases or injuries which might compromise these.

Veterinary Surgeon's name (BLOCK CAPITALS)

Address

.....

Veterinary Surgeon's signature Date of signature

I certify that the above horse has not been administered any non-normal nutrients within the previous three weeks.

Owners name (BLOCK CAPITALS)

Address

.....

Owner's signature: Date of signature

Stallions applying to USA-UK for approval will be accepted under the following conditions:

- 1.All stallions must be registered with USA-UK.
- 2.Stallions must be at least 2 years of age when inspected for USA-UK Licensing.
- 3.All stallions must be DNA profiled (including partbreds).
- 4.All stallions must pass the veterinary inspection detailed above.

For fees, please refer to the USA-UK website.

DIRECTIVES FOR VETERINARY SURGEONS

The enclosed certificate is in respect of a stallion/mare, which the owner required to be inspected at his/her expense.

You are requested to determine whether the stallion/mare is affected by disease or conformation defects, which would render it unsuitable for breeding. Please see enclosed veterinary standards relating to the approval of stallions.

Should the animal inspected be affected by any one of the conditions to an extent rendering you unable to certify that it is suitable for breeding purposes, please send a copy of the certificate with a statement specifying the reasons.

PLEASE FILL IN COMPLETELY.

I am/am not the veterinary surgeon who normally attends this animal.

I have/have not attended this animal in respect of lameness in any limb in the last twelve months.

I have/have not prescribed phenylbutazone or a compound of similar nature (state

which and when)

IF YOU HAVE ATTENDED THIS ANIMAL PLEASE GIVE DETAILS BELOW, IN FULL WITH TREATMENT

I have/have not treated this animal for any wind defect in the last twelve months.

I, THE UNDERSIGNED, CERTIFY THAT I HAVE IDENTIFIED AND EXAMINED THE HORSE DESCRIBED IN THIS PASSPORT (UELN)

I FIND THE ANIMAL SUITABLE FOR BREEDING PURPOSES.

SignedStamp

Address

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To be completed by United Saddlebred Association:

DNA Number

(Numéro du DNA)

STALLION LICENCE GRANTED / REFUSED

Licence Number:.....

**Date: Signature of Horse Registrar:
(nom en lettres capitales et qualite du signataire)**

**USA-U K Stamp
(Invalid if not signed and stamped)
(Cachet de l'organisation, association ou service official)**

