

# Equine Clinic Burg Mueggenhausen GmbH

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Equine specialist



## Protocol for the pre-purchase examination of a horse in English

Customer: \_\_\_\_\_

Horse: \_\_\_\_\_

Breed: \_\_\_\_\_

Sex: \_\_\_\_\_

Color: \_\_\_\_\_

Age: \_\_\_\_\_

Passport number: \_\_\_\_\_

### Attached documents

- Examination protocol
- Radiographic images on CD/per mail
- Endoscopic images on CD/per Mail
- Ultrasound images on CD/per Mail

**Identification:** Horse: <Tier.Name>, Color: <Tier.Farbe>, Breed: <Tier.Rasse>, Sex: <Tier.Geschlecht>, date of birth: <Tier.Geburtstag>, PassNr.: <Tier.Zuchtbuchnummer>

**A. Contract conditions:**

**§ 1** **Customer Name and Address to fill in, (customer)** commissions the veterinarians of the equine clinic Burg Mueggenhausen GmbH (**contractor**) for the examination of the horse **Horse name, breeding, age, colour etc to fill in**. The extent of the examination is determined by the customer and confirmed in § 11 and § 12 of this protocol. All possible examinations which are not named and signed within this protocol can not be included in this pre-purchase examination. The content of this contract can only be amended by a written agreement. The customer will receive an informal paper in advance of the examination which is attached to the protocol.

**§ 2** The examination serves as a statement of the health condition of the horse at the time of the examination. Stereotypes like weaving or crib biting, housing dependant chronic bronchitis, allergies and particular diseases of the upper airway tract that are only assessable after intensive exercise cannot be assessed. The examination does not include assessment of these disorders. The examination will also not give predictions about the conformation of the horse and how this will influence the breeding or sport career of the horse.

**§ 3** The veterinarian is not obliged to explain the risks of all the single steps of the examination when the extent of the examination differs from what we described (B.I - IV). The customer agrees with the handling procedures that need to be undertaken during the examination. The customer guarantees that the owner of the horse also agrees with this.

**§ 4** It is understood and agreed that the results of the examination may be discussed with the vendor/owner and purchaser of the horse but not any other third party. However, the customer in this case, may at his or her discretion not allow disclosure to any other party, including the vendor/owner.

**§ 5** The assessment of the obtained findings (part C of the examination) is done with the greatest possible care of the veterinarian and reflects his or her own opinion. A prediction about the future development of the health status, performance and application cannot be determined, because it is a living animal that develops its constitution and condition constantly. A decision about the purchase or sale can only be taken by the customer.

**§ 6** The costs for the clinical standard exam, (without radiology etc.) are based on the purchase price of the horse, obtained from **the customer** personally. If the purchase price of the horse stays under **5,000 €** the costs are **230 € excl. VAT. When the purchase price of the horse exceeds 5,000 €, the price of the clinical exam rises with 0.6% of the purchase price/value.** The customer knows that the liability rises when the purchase price rises considerably. It will not be possible to change the purchase price/value after the examination has been started.

The customer or the authorised person confirms hereby personally and binding the purchase price/value of the above mentioned and to be examined horse in this contract:

A) € \_\_\_\_\_ Read and accepted: Signature: \_\_\_\_\_ X

**§ 7** The contractor is liable for an amount that is not higher than that of the purchase price/value of the horse to a maximum of **150,000 €**. When higher liability cover is required, the customer should discuss this before the start of the examination with the contractor – Equine clinic Burg Mueggenhausen GmbH – and this should be accepted in written form. This is not possible after the examination. The same liability cover applies to any persons authorized in the contract. Other third parties are not able to claim on the clinic.

**§ 8 Individually negotiated terms:**

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**§ 9** When there are no individually negotiated terms for limiting the period of prescription, the statute of limitations is valid for one year. This means that legal proceedings can only be initiated by the customer or other person authorised within the contract mentioned, within the period of one year, beginning with the start of the legal statute of limitations. The final statute of limitations occurs at the latest, five years after the date of examination.

**§ 10** The country of examination is independent of the agreed conditions and process of examining in this contract. Even for examinations outside Germany, the German legal Court is the only Court who can apply for assessing the conditions of this contract. This includes involved third parties as well. Area of jurisdiction is the Court of Bonn (Landgericht Bonn).

§ 11 Price & order list of the examination profile

Definition of the examination	Cost in Euro without taxes	Signature
<p><b>Clinical Examination following the attached protocol B.I. to B.IV.</b></p> <p>The price of the examination is a standard 230 € plus an extra 0.6% of the purchase price/value if it goes over 5.000 €. In case the pre-purchase examination is terminated by the customer during the clinical examination, only the standard price of 230 € needs to be paid.</p>	<p>230,00 € &amp; <u>0,6</u> % of the purchase price/value</p>	<p><input type="checkbox"/> Yes    Signature: _____ X</p>
<p><b>Standardised German radiological examination profile "Roentgenleitfaden"</b></p> <p>For further explanation see the Instruction document or internet: <a href="http://www.equineclinic.de">www.equineclinic.de</a> 12 images as an overview of the four distal limbs, navicular area and hock</p>	<p>12 x € 28,00 ** = 336,00</p>	<p><input type="checkbox"/> Yes    Signature: _____ X</p>
<p><b>Extended profile of "Roentgenleitfaden":</b></p> <p>Stifle lateromedial projection    <input type="checkbox"/> Hind Right    <input type="checkbox"/> Hind left Stifle caudocranial view    <input type="checkbox"/> Hind Right    <input type="checkbox"/> Hind left Vertebral spines 2 to 3 images    <input type="checkbox"/></p>	<p>31,00 € Per radiograph</p>	<p><input type="checkbox"/> Yes    Signature: _____ X</p>
<p><b>Individual profile for X-rays</b></p> <p>Please look on the "Image Pre-Purchase Order list" and make your own choice. Print the list, mark the required images and attach it to the contract. If necessary ask your home veterinarian or us for help.</p>	<p>Less than 10 images:    31,00 €/image Up to 25 images:    29,00 €/image Up to 40 images:    27,00 €/image More than 40 images:    25,00 €/image</p>	<p><input type="checkbox"/> Yes, Order list attached Signature: _____ X</p>
<p><b>Ultrasound images of the SDFT and DDFT</b> (superficial digital flexor tendon and deep digital flexor tendon) from carpus/hock to fetlock: <input type="checkbox"/> Front right    <input type="checkbox"/> Front Left    <input type="checkbox"/> Hind Right    <input type="checkbox"/> Hind left</p>	<p>One leg:    92,00 €    Two legs: 145,00 € Three legs: 198,00 €    Four legs: 239,00 €</p>	<p><input type="checkbox"/> Yes    Signature: _____ X</p>
<p><b>Ultrasound images of the suspensory ligament</b> <input type="checkbox"/> Front right    <input type="checkbox"/> Front Left    <input type="checkbox"/> Hind Right    <input type="checkbox"/> Hind left</p>	<p>One leg:    62,00 €    Two legs: 105,00 € Three legs: 140,00 €    Four legs: 170,00 €</p>	<p><input type="checkbox"/> Yes    Signature: _____ X</p>
<p><b>Other ultrasound images</b> _____ <input type="checkbox"/> Front right    <input type="checkbox"/> Front Left    <input type="checkbox"/> Hind Right    <input type="checkbox"/> Hind left</p>	<p>From 45,00 €</p>	<p><input type="checkbox"/> Yes    Signature: _____ X</p>
<p><b>Endoscopic examination of the larynx, trachea and lungs.</b></p>	<p>96,00 €</p>	<p><input type="checkbox"/> Yes    Signature: _____ X</p>

\*\* Special price if you choose to apply the standard profiles. Normally we charge 31 € per radiograph.

§11 Part 2: Other examinations	Cost in Euro without taxes	Signature
<b>“Doping” examination</b> <input type="checkbox"/> A.) Examination for NSAIDS and Corticosteroids incl. preparation of sample <input type="checkbox"/> B.) Extra examination for sedatives <input type="checkbox"/> C.) Preparation of sample and storage (serum in ice -18 °C) for 6 months <input type="checkbox"/> D.) Special doping set to be sent, extra costs € 35,00 <b>Examination for anabolics can only be carried out by special request or urine samples</b>	A.) 160,00 € B.) 115,00 € C.) 45,00 € D.) 35,00 €	<input type="checkbox"/> A.) <input type="checkbox"/> B.) Signature: <input type="checkbox"/> C.) <input type="checkbox"/> D.) _____ X
<b>Laboratory examination</b> <input type="checkbox"/> A.) Examination of 12 blood parameters (“screening”) <input type="checkbox"/> B.) Faeces examination for parasites <input type="checkbox"/> C.) Export tests. Country _____ <input type="checkbox"/> D.) Extras:	A.) 59,00 € B.) 54,00 € C.) Differs per country D.) Price by request	<input type="checkbox"/> A.) <input type="checkbox"/> B.) Signature: <input type="checkbox"/> C.) <input type="checkbox"/> D.) _____ X
<b>Extra examination of the respiratory system ( arterial blood check etc.)</b>	Price by request	<input type="checkbox"/> Yes Signature: _____ X
<b>Breeding examination of</b> <input type="checkbox"/> Mares <input type="checkbox"/> Stallions	Price by request	<input type="checkbox"/> Yes Signature: _____ X
<b>Extra eye examination with diagnostic tools, for example ultrasound, special lamp etc.</b>	Price by request	<input type="checkbox"/> Yes Signature: _____ X
<b>Rectal examination (examination of the pelvic and abdominal organs)</b>	39,00 €	<input type="checkbox"/> Yes Signature: _____ X
<b>Other requests</b> _____		<input type="checkbox"/> Yes Signature: _____ X
<b>Written comments about other radiographs, not made during the pre-purchase examination</b>	5,00 € per radiograph	<input type="checkbox"/> Yes Signature: _____ X

§ 12 The customer is obliged to pay for the radiographs and the assessment of the radiographs he or she has selected and signed for on this form. These are the property of the contractor. You are not obliged to publicize them. Copies can be obtained on request, this will incur extra costs. Assessment of other, previously taken images (radiographs, ultrasound images etc) is only possible when they are signed by the veterinarian who was responsible for these images.

§ 13 Special agreements/demands for the pre-purchase examination:

\_\_\_\_\_

\_\_\_\_\_

§ 14 Should one clause in this contract be partially or entirely ineffective, the contract as a whole will not be affected. The ineffectual clause is then replaced with a regulation that comes closest to the sense of the ineffectual clause. The examination report and its content is subject to the laws of the Federal Republic of Germany with the exception of any conflicting standards where applicable. The German and the English texts of the examination report shall be equally authentic; in the event of any inconsistency between the German und the English text, the German text shall prevail and is legally binding.

\_\_\_\_\_ , \_\_\_\_\_ X \_\_\_\_\_ Contractor (veterinarian/Equine clinic Burg Müggenhausen)

Place Date Customer

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## B. Examination protocol

### B. 1. Detailed history of the horse as supplied by the vendor or authorised person:

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Period of ownership: \_\_\_\_\_

Was the horse presented for a pre-purchase examination in the last 12 weeks:  Yes result: \_\_\_\_\_  No  Not known

Intended purpose/educational stage of the horse:  Dressage cl. \_\_\_  Jumping cl. \_\_\_  Eventing cl. \_\_\_

Western cl. \_\_\_  Racing \_\_\_  Leisure  Broken  Other: \_\_\_\_\_

Use in the last 6 weeks:  Sport  Training  Box rest  Pasture

Medication in the last 6 weeks:  No  Yes: \_\_\_\_\_

Previous lameness:

\_\_\_\_\_

Previous diseases:

\_\_\_\_\_

Surgeries:

Castration; \_\_\_\_\_

\_\_\_\_\_

Stereotypies: (Weaving, crib biting etc.): \_\_\_\_\_

Housing:  Stable  Pasture  Open stable  Stable & pasture

Feeding:  Hay  Dry  Wet;  Silage  Oats  Pellets  Other: \_\_\_\_\_

Bedding:  Straw  Shavings  Other: \_\_\_\_\_

Last date of shoeing: \_\_\_\_\_ Last date of deworming: \_\_\_\_\_

Vaccinations:  Regularly  Influenza  Herpes  Tetanus Toxoid  Other:

Passport:  Present FEI-Pass:  Present Medical adnex:  Present  Slaughter animal  Non-slaughter animal

I guarantee that the information provided about the horse in this form is correct. I agree with the procedure of the pre-purchase examination. This includes the obtaining of blood samples for a doping test, for sedation during the endoscopic examination and for removal of the shoes for the radiographs of the navicular bone.

During the pre-purchase examination I will be present personally /not personally.\*

As the current owner or authorised person, I also declare that:

The equine clinic Burg Mueggenhausen GmbH was not involved with the pre-treatment of the horse.

A veterinarian of the equine clinic Burg Mueggenhausen GmbH did treat the horse prior to the pre-purchase examination. The equine clinic Burg Mueggenhausen GmbH is hereby relieved of the professional code of secrecy for veterinarians.

Mr./Ms. \_\_\_\_\_ from \_\_\_\_\_ is authorized to represent me and sign my documents during the examination.

Undersigned person:  Purchaser  Vendor  Authorised person

\_\_\_\_\_  
Place Date Signature, (vendor or authorised person)

\* cross out whichever does not apply

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**B.2.**  Customer  Purchaser  Vendor

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

**B.3.**  Purchaser  Vendor  see B.1

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

**B.4. Third parties as per § 7 of the contract:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

**B.5. Persons present during the examination:**

Purchaser  Vendor  Third person/B.4.  Others \_\_\_\_\_

**B.6. Place and date of examination:**

Burg Mueggenhausen, the \_\_\_\_\_ or  \_\_\_\_\_, the \_\_\_\_\_

**B.7. Preliminary information stated by the purchaser or authorised person:**

Before the examination the purchaser had a test ride on the horse:  No  Yes

Any rider's remarks:  No  Yes \_\_\_\_\_

**B.8. Description of the horse:**

Name: \_\_\_\_\_

Registration number/passport: \_\_\_\_\_

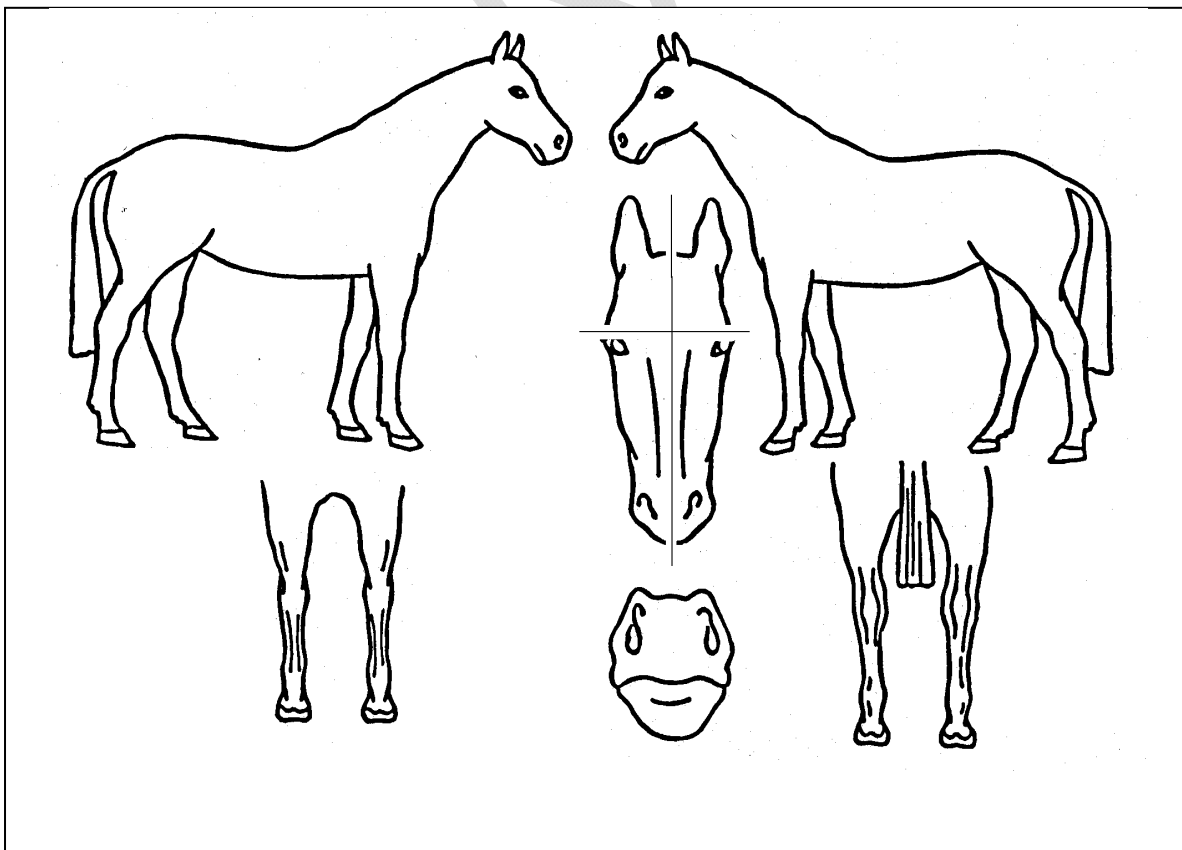
Breed: \_\_\_\_\_

Sex: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Colour: \_\_\_\_\_

Not necessary when a description of the horse from the passport is attached.



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### B. I. General examination

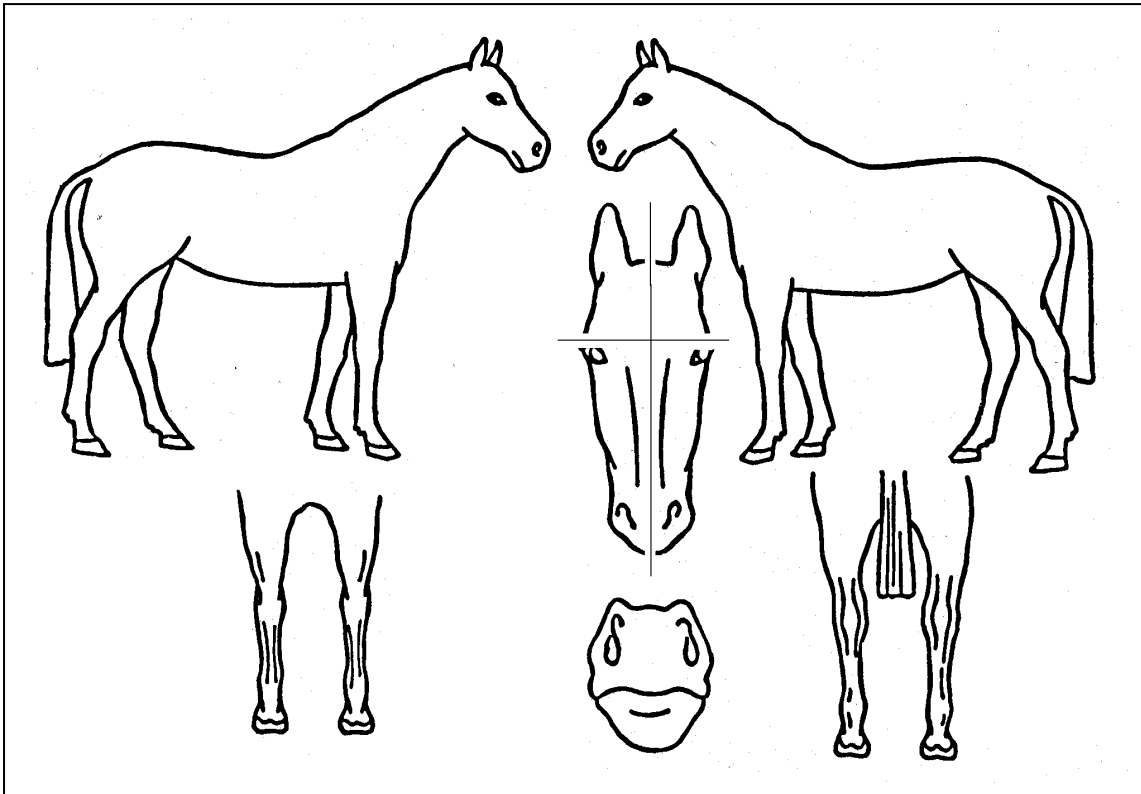


Diagram to draw in scars, exostoses, other points of interest:

→ Scars	O Exostoses	+ Other
Grooming condition:	<input type="checkbox"/> NAF (no abnormalities found)	_____
Skin and hair:	<input type="checkbox"/> NAF	_____
Striking scars:	<input type="checkbox"/> No	_____
General condition:	<input type="checkbox"/> NAF	_____
Temperature (when suspicious):	_____ °C	
Pulse: Rest: _____ / min.	Quality: <input type="checkbox"/> NAF	_____
Heart auscultation:	<input type="checkbox"/> NAF	_____
Respiratory system:	rest frequency: _____ / min.	
Breathing:	<input type="checkbox"/> NAF <input type="checkbox"/> Aggravated inspiration <input type="checkbox"/> Aggravated expiration	
Nasal discharge:	<input type="checkbox"/> No	_____
Spontaneous coughing:	<input type="checkbox"/> No	_____
Coughing reflex:	<input type="checkbox"/> No	_____
Larynx- palpation:	<input type="checkbox"/> NAF	_____
Trachea auscultation:	<input type="checkbox"/> NAF	_____
Trachea- palpation:	<input type="checkbox"/> NAF	_____
Lung auscultation:	<input type="checkbox"/> NAF	_____
After breathing stimulation:	<input type="checkbox"/> NAF	_____
Mucosal membranes:	<input type="checkbox"/> NAF	_____
Conjunctiva:	<input type="checkbox"/> NAF	_____
Mandibular lymph nodes:	<input type="checkbox"/> NAF	_____
Jugular veins:	<input type="checkbox"/> NAF	_____

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Eyes: Signs of disorders of the conjunctiva, cornea, iris, lenses, vitreous humour, background of the eye:

Mydriaticum used  Yes  No

Peripheral nerve system:  NAF \_\_\_\_\_

Mouth, teeth (inspection):  NAF \_\_\_\_\_

Exterior, reproductive organs (palpation & inspection):  NAF \_\_\_\_\_

Faeces:  NAF \_\_\_\_\_

Other: \_\_\_\_\_

## B. II. Examination of the locomotory system.

Inspection and palpation of the limbs: [e.g. stature, hoof conditions]

	Position Front			Position laterally, 90°			Shoeing						Feet				Complete fetlock tendon sheath								
	Normal	Toed in	Toed out	Normal	Over at knee	Back at knee	Normal	No shoes	Too long ago	Thickened	Too narrow/ small	Flat	Other	Normal	Steep	Flat	Narrow hoof	Very wide	Bad horn condition	Normal	Filled	Considerably filled	Hardened	Painfull	
Front left																									
Front right																									
Hind left																									
Hind right																									

Other findings:

Front left: \_\_\_\_\_

Front right: \_\_\_\_\_

Hind left: \_\_\_\_\_

Hind right: \_\_\_\_\_

Back palpation:  NAF \_\_\_\_\_

3. Examination of walk and trot in hand straight forward and in a circle on hard ground.

NAF \_\_\_\_\_

4. Signs for ataxic movements:  No \_\_\_\_\_

5. Provocation problems:

a) Flexing pain:  No \_\_\_\_\_

b) Flexing tests of the limbs:

### Flexing pain

Front left:  No  Yes

Front right:  No  Yes

Hind left:  No  Yes

Hind right:  No  Yes

### Trotting after 1 Min. of flexing

FL: - ± + ++

FR: - ± + ++

HL: - ± + ++

HR: - ± + ++

### Annotation:

- : free trotting

± : first steps not sound

+ : ca. 10 steps lame

++: very lame

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**B.III. Examination of the heart, respiratory system and locomotory system under workload.**

**(Exercise till the breathing becomes more intense)**

Lunged  Ridden

1. Abnormal breathing:  No  Inspiratory  Expiratory
2. Breathing problems:  No \_\_\_\_\_
3. Locomotory disturbances:  No \_\_\_\_\_
4. Coughing, nasal discharge:  No \_\_\_\_\_
5. Auscultation: Heart:  NAD \_\_\_\_\_
- Lungs:  NAD \_\_\_\_\_

6. Heart and breathing rates:  
After workload in  
 Trot  Canter

	Before workload	After workload	Recovery time
Pulse rate			
Breathing rate			

**B. IV. Special examinations:**

- I.  Radiographed  Not radiographed  See attached protocol

	German standard projections „Roentgenleitfaden“	Grade (Klasse)
1. <input type="checkbox"/>	<b>Latero-medial projection (LM) of the distal limb, front left</b> (German: Zehe seitlich vorne links) Lateromedial <u>overview</u> of the foot, coffin joint, pastern joint, fetlock joint and sesamoid bones, foot elevated	
2. <input type="checkbox"/>	<b>Latero-medial projection (LM) of the distal limb, hind left</b> (German: Zehe seitlich, hinten links) Lateromedial <u>overview</u> of the foot, coffin joint, pastern joint, fetlock joint and sesamoid bones, foot elevated	
3. <input type="checkbox"/>	<b>Latero-medial projection (LM) of the distal limb, front right</b> (German: Zehe seitlich vorne rechts) Lateromedial <u>overview</u> of the foot, coffin joint, pastern joint, fetlock joint and sesamoid bones, foot elevated	
4. <input type="checkbox"/>	<b>Latero-medial projection (LM) of the distal limb, hind right</b> (German: Zehe seitlich hinten rechts) Lateromedial <u>overview</u> of the foot, coffin joint, pastern joint, fetlock joint and sesamoid bones, foot elevated	
5. <input type="checkbox"/>	<b>Dorsolateral-plantaromedial projection (D45° L-PIMO) of the tarsus, hind left</b> (German: Tarsus schräge Darstellung 45° hinten links) Oblique view of the tarsal joint showing the individual tarsal bones (T1, T2, T3)	
6. <input type="checkbox"/>	<b>Plantarolateral-dorsomedial projection (PI35° L-DMO) of the tarsus, hind left</b> (German: Tarsus schräge Darstellung 135° hinten links) Oblique view of the tarsal joint showing the individual tarsal bones (T1, T2, T3)	
7. <input type="checkbox"/>	<b>Dorsolateral-plantaromedial projection (D45° L-PIMO) of the tarsus, hind right</b> (German: Tarsus schräge Darstellung 45° hinten rechts) Oblique view of the tarsal joint showing the individual tarsal bones (T1, T2, T3)	
8. <input type="checkbox"/>	<b>Plantarolateral-dorsomedial projection (PI35° L-DMO) of the tarsus, hind right</b> (German: Tarsus schräge Darstellung 135° hinten rechts) Oblique view of the tarsal joint showing the individual tarsal bones (T1, T2, T3)	

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		Grade (Klasse)
9. <input type="checkbox"/>	<b>Dorsoplantar projection (DPI) of the tarsus, left , (German: Tarsus AP Darstellung, hinten links).</b> AP angle of the tarsal joint showing the individual tarsal bones (T1, T2, T3)	
10. <input type="checkbox"/>	<b>Dorsoplantar projection (DPI) of the tarsus, right , (German: Tarsus AP Darstellung, hinten rechts).</b> AP angle of the tarsal joint showing the individual tarsal bones (T1, T2, T3)	
11. <input type="checkbox"/>	<b>Dorsoproximal-palmarodistal projection (DPr-PaDi), front left , (German: Oxspring, Vorne links)</b> Dorsoproximal view of the navicular bone, coffin bone, coffin joint space, short pastern bone and pastern joint	
12. <input type="checkbox"/>	<b>Dorsoproximal-palmarodistal projection (DPr-PaDi), front right , (German: Oxspring, Vorne rechts)</b> Dorsoproximal view of the navicular bone, coffin bone, coffin joint space, short pastern bone and pastern joint	
<b>Extended views</b>		
13. <input type="checkbox"/>	<b>Lateromedial projection (LM) of the stifle joint, left , (German: Kniegelenk seitlich, hinten links)</b> Lateromedial view of the patella, including joint region of the femur and tibia	
14. <input type="checkbox"/>	<b>Lateromedial projection (LM) of the stifle joint, right , (German: Kniegelenk seitlich, hinten right)</b> Lateromedial view of the patella, including joint region of the femur and tibia	
15. <input type="checkbox"/>	<b>Vertebrae, thoracic to lumbar region (German: Rücken BWS/LWS Dornfortsätze)</b> Transition from the thoracic region to the lumbar region of the vertebrae spinal ridges showing the distances between the single ridges and possible chronic changes.	
16. <input type="checkbox"/>	<b>Caudocranial projection (Cd15° Pr-Cr Di) of the stifle joint, left , (German: Kniegelenke AP, hinten links)</b> DP view of the patella, including joint region of the femur and tibia	
17. <input type="checkbox"/>	<b>Caudocranial projection (Cd15° Pr-Cr Di) of the stifle joint, right , (German: Kniegelenke AP, hinten rechts)</b> DP view of the patella, including joint region of the femur and tibia	
18. <input type="checkbox"/>	<b>Skyline-projection of the navicular bone (PaPr-PaDi),front left, (German: Skyline- Aufnahme des Strahlbeins, Vorne links)</b> Specific, tangential view of the navicular bone showing possible changes in navicular region.	<b>X</b>
19. <input type="checkbox"/>	<b>Skyline-projection of the navicular bone (PaPr-PaDi),front right, (German: Skyline- Aufnahme des Strahlbeins, Vorne right)</b> Specific, tangential view of the navicular bone showing possible changes in navicular region.	<b>X</b>

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**Other radiographs:**  see attached protocol about extended order list for x-rays

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**II. Endoscopy of the upper respiratory system:**

Not examined     NAF     Images printed     Digital images     Sedated

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**III. Other examinations:**

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**IV. Doping sample:**

Not taken     Taken for examination     Taken and stored for 6 months

**C. Assessment of the examination results:**

**We do not assess stereotypic behaviour**

During today's examination we did not find the presence of significant health abnormalities.

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Radiographic examination:  see attached protocol about extended order list for x-rays

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because of an extended order for radiographs the horse is not classified by the german standard "Roentgenleitfaden"-protocol

The radiological status of the horse can currently be classified in grade \_\_\_\_\_ by the German standardised "Roentgenleitfaden"-protocol.

The general radiological status of the horse regarding the "Roentgenleitfaden", after consideration of the overall status of the horse can currently be graded as \_\_\_\_\_.

The customer or authorised person confirms that he or she accepts the terms of the examination contract. The findings herein described and the implications in terms of use of the horse have been explained. The undersigned warrants that they have the permission of the horse owner to sign for the examination results and specify purchase price of the horse as in §6 and §7 of the contract.

\_\_\_\_\_, the \_\_\_\_\_  
Place date

\_\_\_\_\_  
customer or authorised person

\_\_\_\_\_  
Präsent persons

\_\_\_\_\_  
Examining veterinarian