

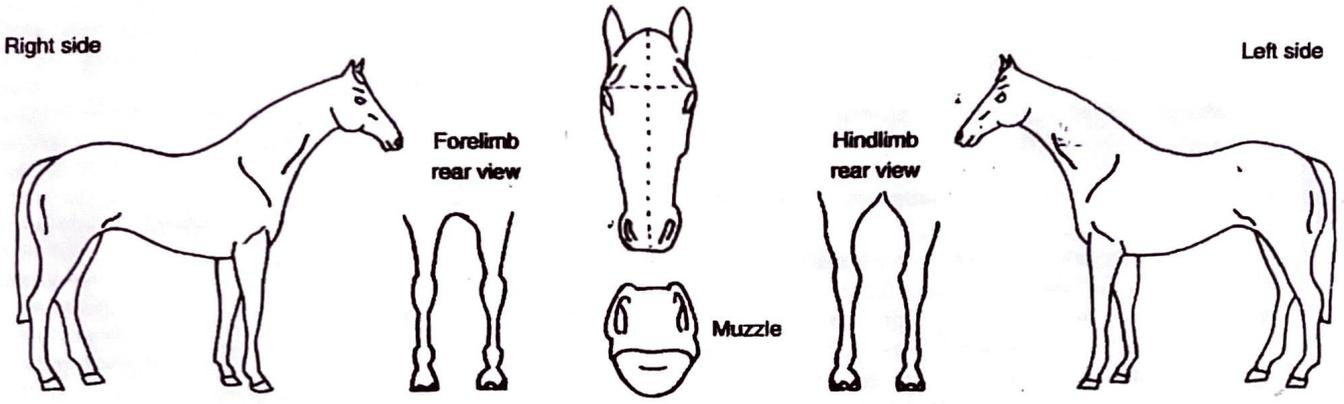
Pre-purchase examination

(formulated by the Dutch Equine Group of the Royal Netherlands Veterinary Association).

Number: E 17698

Client: Alessia Benichini
 Address: Via di Tiglios 817/C
 Postcode/City: Lucera
 Country: _____
 Purchaser-vendor-owner: _____
 Present: yes/no
 Level of training (according to owner): _____
 Proposed use of horse/pony: SPORT

Description
 Breed: _____ Stud-book number: _____
 Age: _____ Sex: _____
 Withers height: _____
 Name of horse/pony: Silencio Vaut'shepa
 Colour: _____
 Marks: _____
M. chip: 867000009966490



CLINICAL EXAMINATION

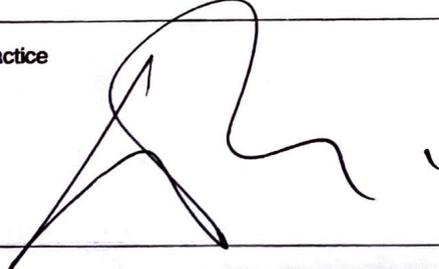
no abnormal findings abnormal findings (see examination protocol)

RADIOLOGICAL FINDINGS

good } acceptable
 satisfactory } increased risk
 moderate } not acceptable
 unsatisfactory }

During the examination there were/were not indications of vices.

After the examination blood samples were/were not taken for investigation of banned substances.

Veterinary practice 

CONCLUSION: Il soggetto in data odierna presenta una clinica buona, il profilo Rx evidenzia dei fattori di rischio più alti del normale (vedere la pagina presente negli) Il soggetto in data odierna è da considerarsi idoneo con riserva.

1. The examining veterinary surgeon and/or veterinary practice shall not accept liability for loss or damage caused as a result of their carrying out the examination or as a result of inaccuracies or shortcomings in their preparation of this report unless it is established that this loss or damage is due to wilful or gross negligence on the part of the examining veterinary surgeon.
2. Liability shall at times be limited to the amount to which the liability insurance gives an entitlement in the event of a claim.
3. Any dispute with respect to the examination shall be decided by arbitration in accordance with the rules of the Dutch Arbitration Committee for Horses and Ponies.

Thus examined and reported by (name veterinary surgeon): _____
 of (address veterinary surgeon): _____

This report refers to the situation on: 04/07/2025 (date)

Signature client: _____

Signature examining veterinary surgeon: _____

