

## VALUE SUBSTANTIATION FORM (JOV)

PLEASE COMPLETE TO UPDATE SHOW/BREEDING RECORDS AND/OR REQUEST AN INCREASE IN VALUE. *THIS FORM IS REQUIRED.*

<b>CLIENT'S NAME:</b>	<b>POLICY NO:</b>
<b>NAME OF HORSE:</b>	<b>YEAR FOALED:</b>
<b>USE:</b>	

**COMPLETE FOR ALL HORSES:**

Do you wish to amend the insured value of this horse? (check one)     YES     NO

\*\*If yes, what would you like the insured value of the above named horse to be? \_\_\_\_\_

If requesting to increase your horse's insured value, would you like to add any of the following **Medical Endorsements** for an additional premium?

\$7,500 Limit Medical

**\*Requests to add medical coverage are subject to value eligibility. Contact our office for coverage details & pricing\***

\$10,000 Limit Medical

\$15,000 Limit Medical

**\*\*All requests for changes in coverage do not become effective until written notice of underwriting approval has been received.**

Do you currently have equine insurance on this horse with any other company? \_\_\_\_\_

If yes, what is the total value of all mortality policies providing coverage on this horse? \_\_\_\_\_

**COMPLETE FOR SHOW/PERFORMANCE HORSES:**

Money/Points won during previous 12 months: \_\_\_\_\_ Lifetime earnings/points won: \_\_\_\_\_

Level of competition (i.e. NCHA, NRHA, WPRA, PRCA, 4H, etc.): \_\_\_\_\_

Is this horse currently being shown or used for competition? \_\_\_\_\_ If no, please give reason: \_\_\_\_\_

**COMPLETE FOR HORSES IN TRAINING:**

Trainer's name and location: \_\_\_\_\_ Phone: \_\_\_\_\_

Monthly training fees: \_\_\_\_\_ Number of months in training: \_\_\_\_\_ Amount paid in training for previous 12 months: \_\_\_\_\_

If unshown and in training, anticipated date and place of first show you plan on entering: \_\_\_\_\_

***\*\* Training is considered in establishing value only for those horses under the age of six. Half of training expenses for up to two years will be considered when establishing value.***

**COMPLETE FOR STALLIONS USED FOR BREEDING:**

Current stud fee: \_\_\_\_\_ Number of paid breedings last season: \_\_\_\_\_ Number of mares conceived last season: \_\_\_\_\_

How many outside mares bred last season? \_\_\_\_\_ How many inside mares bred last season (owned by insured)? \_\_\_\_\_

Number of mares booked for next breeding season? \_\_\_\_\_

**COMPLETE FOR BROODMARES: *\*\* If mare is used for embryo transfer and is still being shown, also complete section for show/performance horses.***

Currently in foal? \_\_\_\_\_ If yes, to what stallion(s) and stud fee paid? \_\_\_\_\_

Anticipated foaling date(s)? \_\_\_\_\_

If mare is used for embryo transfer, how many times was she flushed, and how many embryos were successfully transferred for each of the last three breeding seasons?  
 \_\_\_\_\_

Stallion(s) bred to previous season and stud fee paid? \_\_\_\_\_

Date last foal was born? \_\_\_\_\_ Has the mare had healthy foals for each of the last three seasons she was bred? \_\_\_\_\_

If no, explain: \_\_\_\_\_ Average sale price of foals? \_\_\_\_\_

\_\_\_\_\_  
**Date Signed**

\_\_\_\_\_  
**Signature of Insured**