



TAYLOR HARRIS INSURANCE SERVICES, LTD

(800) 291-4774 | info@thishorseinsurance.com

PO Box 449, Middleburg, VA 20118 | www.thishorseinsurance.com

# Justification of Value Form

Insured Name: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Registered Name: \_\_\_\_\_ Breed: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

## Show / Performance Record (Please list most recent competitions)

Show/Competition	Rating (Local, Regional, National, Int'l)	Date	Class/Division	Placing	# Entries	Winnings
						\$
						\$
						\$
						\$

If this is a Dressage Horse, please indicate what Level competing and average score:

## Training Record

Type of Training	Cost of Training Per Month (Excluding Board and Maintenance)	# of Months in training with a professional	Total Cost
	\$		\$

## Breeding Record

Mares	# of foals since owned	Average Sale Price of foals	Is the mare currently in foal? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, Covering Stallion's Name and Stud Fee	Due Date

Stallions	# of Mares bred last year	# of Mares booked for upcoming year	Stud Fee Charged	Annual Breeding Income
	Non-Owned _____ Owned _____	Non-Owned _____ Owned _____	\$	

## Other information to Justify Value:

Signature of Insured

Date Signed