

Nederlands Connemara Pony Stamboek

APPLICATION DUPLICATE PASSPORT

This form must be complete and after signing both pages send to kantoor@connemara.nl. Incomplete applications can't be processed.

UELN/lifenumber : Chipnumber : Stamboeknumber :		
DATA OWNER/APPLICANT (also i	nvoice address)	
Are you a member of our Studbook	?:□yes□no	
•	If no, would you become a member \square yes \square no	
First and surname :	M/F*	
Address + zip code city :		
Phone number :	email:	
DATA BREEDER (IF KNOWN)		
,	M/F*	
•	_email:	
Don't forget to answer the question		
If the pony is not situated in the Netherland your vet has to check the chipnumber and other data of the pony. Stamp and signature of the vet, on both pages are required.		
	your vet we will send you an invoice. After payment we will send the can find the rate on <u>www.connemara.nl</u> – Stamboek NCPS –	
Do you want to receive the passpor	t with track and trace? \Box no \Box yes (extra costs)	
	Paragraph	



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QUESTIONNAIRE:

I. Are you the owner of the equine:	
☐ If yes, please provide copies of documents she a signed statement that you are the owner ar	owing this and if these are not available, please send
	please submit a statement from the owner stating plicate passport / replacement passport for the
□ No.	
2. Is someone (like the previous owner) disputing	that you are the owner or holder:
\square If so, by whom	
□ No.	
3. If you bought the equine: there was a passport o	n the date of sale:
Yes, please submit a statement from the prev over to you at the handover.	ious owner showing that the passport was handed
□ No.	
4. Since which date did you lose the passport:	
5. How has the passport been lost (if possible, subs	stantiated with documents):
☐ Theft	
☐ Fire	
☐ Other, namely:	
6. Did you report the loss of the passport:	
\square If so, please submit a copy of the police repor	t
□ No.	
7. Do you know or suspect where the original pass	port is:
\square If yes, where	
□ No.	
8. What have you done to get the original passport	(if possible, substantiate with documents):
The undersigned stated to have filled in the above	
Name of applicant	Signature + date
Stamp and signature Vet:	

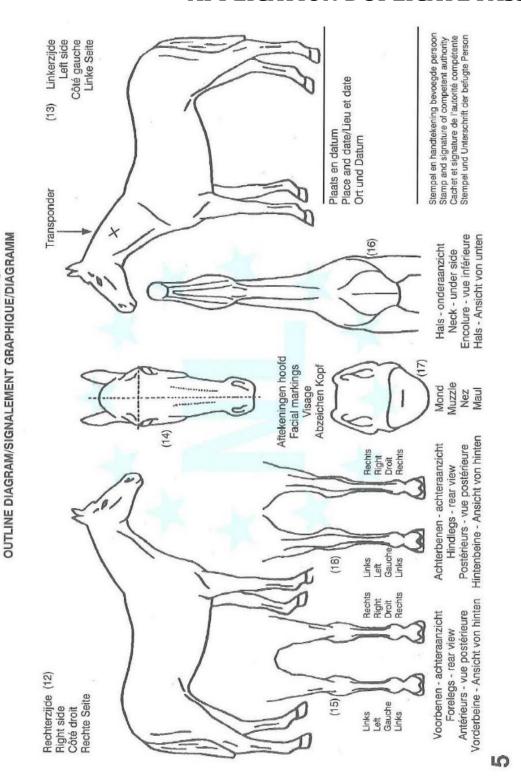
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HOOFDSTUK 1 DEEL B: SCHETS

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