



American Warmblood Registry

P.O. Box 1332 DeLeon Springs FL 32130

Phone (561) 693 5516 Fax (775) 667 0516

info@americanwarmblood.com www.americanwarmblood.com

AFFIDAVIT FOR DUPLICATE CERTIFICATE

INSTRUCTIONS

* PLEASE READ CAREFULLY *

A delay in processing will result if information is omitted.

1. Part 1 *must* be completed by owner on AWR records.
2. Part 2 completed if lost by someone other than owner on AWR records.
3. **Four full-view color photographs (front, back, and both sides) are required in all instances. If branded, a photo must clearly display brand. Photos are not returnable.**
4. Remit appropriate fee(s) with affidavit.
5. Form *must* be notarized.
6. **The horse *must be DNA typed so that a comparison can be made with the DNA already on file before a duplicate certificate will be issued.***
7. If a change in ownership needs to be made, include the properly completed transfer report with appropriate fees.

▶ Please regard this affidavit as a request for issuance of a duplicate certificate for:

_____ Horse's Name

_____ Registration Number

Part 1: To be completed in ALL INSTANCES by recorded owner.

I, _____ hereby affirm that the sentence marked below describes the circumstances surrounding the loss or destruction of the certificate for the horse identified in this affidavit.

One of the boxes below must be marked in order for us to proceed.

- I lost the certificate.
- I mailed or delivered the certificate to: NAME _____ ADDRESS: _____
If given to an auction company, please also list the date of the sale: DATE: _____
- Other (please explain): _____

The undersigned agrees to indemnify and hold harmless the AWR from any and all liability, whenever arising, by virtue of its reliance of this affidavit and its issuance of the replacement certificate, agrees to defend the AWR at his expense, and if judgment is made against the AWR, to pay judgment and obtain written release in form acceptable to AWR. By submitting this document to AWR, the undersigned hereby agrees to be bound by all the terms and conditions of AWR's Official Rules and Regulations.

Sworn to before me this _____ day of _____

Notary Public: _____

My commission expires: _____

Signature of Owner of Record

Address

City

State

E-mail address

Owner's Daytime Phone Number

Part 2: To be completed IN ADDITION to Part 1 if the certificate was not lost by recorded owner.

I, _____ hereby affirm that the sentence marked below describes the circumstances surrounding the loss or destruction of the certificate for the horse identified in this affidavit.

One of the boxes below must be marked in order for us to proceed.

- I lost the certificate.
- I mailed or delivered the certificate to: NAME _____ ADDRESS: _____
If given to an auction company, please also list the date of the sale: DATE: _____
- Other (please explain): _____

The undersigned agrees to indemnify and hold harmless the AWR from any and all liability, whenever arising, by virtue of its reliance of this affidavit and its issuance of the replacement certificate, agrees to defend the AWR at his expense, and if judgment is made against the AWR, to pay judgment and obtain written release in form acceptable to AWR. By submitting this document to AWR, the undersigned hereby agrees to be bound by all the terms and conditions of AWR's Official Rules and Regulations.

Sworn to before me this _____ day of _____

Notary Public: _____

My commission expires: _____

Signature of Owner of Record

Address

City

State

E-mail address

Owner's Daytime Phone Number

FEES

SUBJECT TO CHANGE WITHOUT NOTICE

U.S. Funds Only - All Fees are Non-Refundable

	AWR		If paying by Visa or Mastercard provide the following:	
	Member	Non-member	Card Number	
Duplicate Certificate Fee	\$275	\$550	Expiration Date	
Membership Fee	-----	\$85/\$95	3-digit sec. code	
DNA Kit (required)	\$105	\$210	Cardholder's Name	
			Cardholder's Signature	