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TRANSFER OF OWNERSHIP OF HORSE (SCHEDULE A ONLY)

To facilitate prompt processing of your transfer, please ensure that the applicable NSW <u>Transfer Fee of \$70.00</u> accompanies the completed application.

Please carefully read the Requirements & Guidelines Schedule associated with this application (refer to the appropriate application located elsewhere on the HRNSW website for complete details) so you are fully aware of the requirements associated with the transfer of a horse in the state of New South Wales

		¥ SCHEDU	JLE A : TO BE COI	MPLETED BY	PREVIOUS OWNER	R(S) ¥	
horse	This is to advise that on Name of horse (or if unnamed, breeding and year of foaling)			re W		ve / I have disposed of the	
	to the person(s) listed in Sch o	edule B of this docu	ument	Purchase Price \$		Compulsory er Point 11 of the Schedule)
		ALL PREVI	OUS OWNERS TO	PROVIDE F	JLL NAME & SIGNA	ATURE	
	Full Name		Signature		Full Na	me	Signature
				11			
				12			
				13			
				14			
				15			
				16			
				17			
				18			
				19			
0				20			
				20		Date	
ndependent Witness : Signature							
ndependent Witne	ess : Full Name						
Address							
Please specif	y the name and ad	dress of the perso	on to whom the Registra	ation Assessment	Certificate is to be posted	(if different from th	e Partnership Manager)

Please forward this application, when complete, to the Controlling Body in the state that you wish to have the application processed (if other than NSW, please check that states requirements before submitting the application).