



# Replacement Passport Application

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Bronaeron, Felinfach, Lampeter, Ceredigion, SA48 8AG

passports@equicymru.co.uk

This form is to be completed if your passport has been damaged. Please complete as much information as possible on the front of the form to allow us to identify the equine. The original damaged passport will need to be included with this paperwork when sending into the office. Passport will be stamped with Replacement.

Name of Equine: _____	
Species: Horse/Pony <input type="checkbox"/> Donkey <input type="checkbox"/> Mule <input type="checkbox"/> Other <input type="checkbox"/> _____	
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	Colour: _____
<b>Equine Keeper</b> <i>(who the passport will be sent to)</i>	<b>Equine Owner</b> <i>(if different from the keeper)</i>
Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Other <input type="checkbox"/> _____	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Other <input type="checkbox"/> _____
First Name: _____	First Name: _____
Surname: _____	Surname: _____
Address: _____ _____	Address: _____ _____
Postcode: _____	Postcode: _____
Tel No: _____	Tel No: _____
Email: _____	Email: _____

I confirm that the passport for the animal above has been damaged.

Signature of owner: \_\_\_\_\_ Date: \_\_\_\_\_

Payment can be made via our website <a href="http://www.equicymru.co.uk">www.equicymru.co.uk</a> or by supplying your card details below.		
Card Number: _____	Security Number: _____	
Issue Date: _____	Expiry Date: _____	Issue No (switch Only) _____
Cardholders Name: _____		
Please debit my credit/debit card with £ _____		Signature: _____

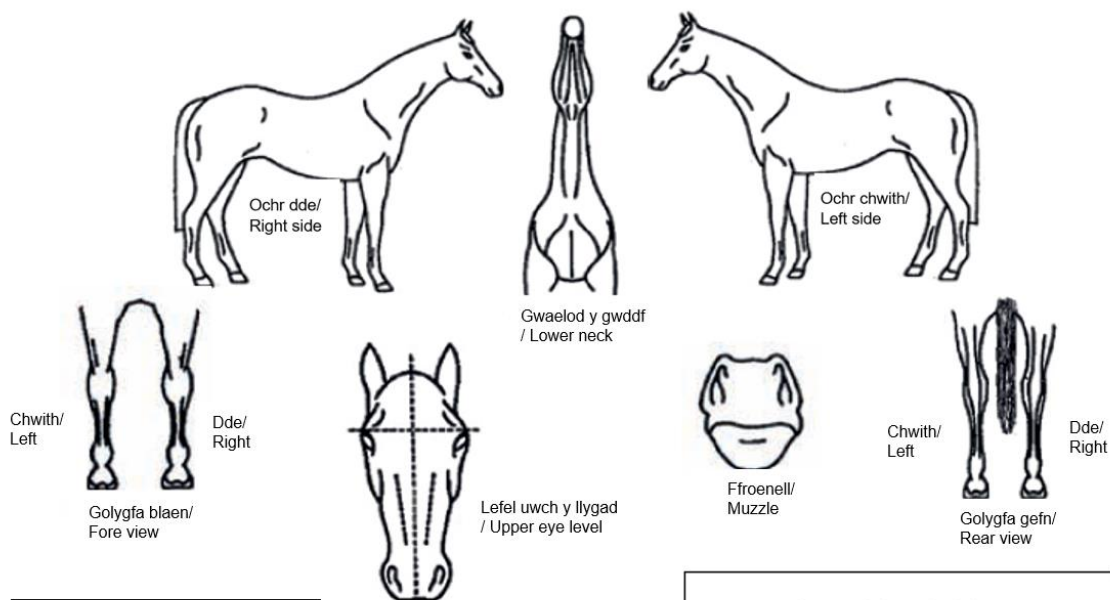
# EquiCymru

This side of the form must be completed by a Veterinary Surgeon.

## Identification - Section A Identification Details

Name of Equine:		Sex:
Colour:		
Head:		
Foreleg - Near Side (left)		
Foreleg - Off Side (right)		
Hindleg - Near Side (left)		
Hindleg - Off Side (right)		
Body		
Acquired Marks		
Description taken by:		

## Section B - Outline Diagram



**I confirm that** *(delete as appropriate)*  
**I have** scanned the horse and no existing  
microchip was found; therefore, I have  
inserted an ISO 11784, compliant  
microchip and attached the barcode  
sticker above. I can confirm that I have  
scanned the microchip pre and post  
insertion, and it is reading correctly/ I  
**have** scanned the horse and confirm a  
microchip has been located.

Date: / /

Signature of Veterinary Surgeon:

Qualifications:

Place attach bar code sticker

Veterinary Official Stamp