



LOST PASSPORT DECLARATION FORM

NAME.....

ADDRESS.....

.....

.....

.....

TELEPHONE NUMBER.....

EMAIL.....

NAME OF HORSE.....

REGISTRATION NUMBER.....

UENL NUMBER.....

MICROCHIP NUMBER.....

I HEREBY DECLARE THAT I HAVE LOST MY HORSE PASSPORT AND REQUIRE A DUPLICATE ONE TO BE ISSUED. I CONFIRM I HAVE TAKEN ALL REASONABLE STEPS TO TRY AND LOCATE THE ORIGINAL AND HAVE FAILED TO DO SO. I ENCLOSE PAYMENT OF THE DUPLICATE PASSPORT FEE OF £37

SIGNATURE.....

DATE.....

**REGISTRATIONS: SHIRE HORSE SOCIETY, SHIRE FARM, ROCKINGHAM CASTLE AND PARK,
UPPINGHAM ROAD, ROCKINGHAM, MARKET HARBOROUGH. LE16 8TP**