



The undersigned veterinary, SYLWESTER ZAJAC, declares that the foal described below has been examined and that this form has been completed to the best of his/ her knowledge.

Name foal : DIZZY 2

Gender: colt - filly

Date of Birth: 11.04.2025

Color: CHESNUT / GREY

Pedigree(ffm): DEMONIC
X
CHICAGO CITY

Owner: DOMINIK JAKUBSIK

Residence: KOZIA WOLA 12 ; 26-652 ZAKRZEW

1. How are:

State of nutrition	<u>good</u>	-	normal	-	inadequate
General Appearance	<u>good</u>	-	normal	-	inadequate
Coat conditions	<u>good</u>	-	normal	-	inadequate
Comments :					

2. Are there any defects in:

Eyes	yes	-	<u>no</u>	if overbite: _____ mm
Teeth	yes	-	<u>no</u>	
Nose	yes	-	<u>no</u>	
Discharge from the nose	yes	-	<u>no</u>	
Comments :				

3. Is the respiration normal? yes - no

If not explain: _____

Have you observed any coughing yes - no

4. Are there any symptoms which indicate a poor or abnormal digestion? yes - no

Comments : _____

5. What is the state of the heartbeat and pulse at rest and after trot? Normal - aberrant
Are there any heart murmurs? yes - no

6. What defects are there concerning the limbs and hooves? yes - no defects
Are there any limb deformities? yes - no

Comments : _____

7. Are there any defects of the external genitalia?

Comments : _____

If Stallion: 2 testicles: yes - no

If Stallion: testicles descend yes - no

8. Does the foal show defects in walk and/or trot? If yes what are the defects? yes - no

Comments : _____

9. Are there any other symptoms of sickness, defects or faults? yes - no

Signed by: SYLWESTER ZAJAC

Date - Location : 30/08/25 KOZIA WOLA

08522
dr Sylwester Zając
specjalista rozrodu zwierząt