

To whom it may concern,

I hereby formally request permission for exemption from the following movement requirement
(tick where appropriate)

<input type="checkbox"/>	Vaccination requirements for movement (unvaccinated or vaccinated more than 24 months ago)
<input type="checkbox"/>	Passport requirements for movement (microchip is required in this case)*
<input type="checkbox"/>	Movement within 40 days of vaccination
<input type="checkbox"/>	Exemption for the 48hr requirement for Health Certification for Movement

For the following horses:

Horse Name	Microchip No* (passport exemptions)	Passport Number

stabled at

Holding Name and ID (if known)	
Address	
GPS Coordinates (if ID unknown)	
Contact No. and Email	

Please supply the exact reason for exemption request and details of the request in full detail
(incomplete descriptions will be denied exemption permission):

Yours sincerely,

.....
Applicant name and signature

.....
Contact no

.....
Date

This application must accompany a formal movement permit application and must be submitted at least 2 working days ahead of the intended movement date.