



## DECLARATION HEREDITARY DISORDERS

Please fill out in BLOCK LETTERS

|                                                                                                       |                                                                                                                                                                                                                                     |                 |                 |
|-------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------|
| <b>Name of horse</b>                                                                                  | FAM MARAVILLA                                                                                                                                                                                                                       |                 |                 |
| <b>Sire</b>                                                                                           | E.S. ZEIN                                                                                                                                                                                                                           | <b>Dam</b>      | FAM JUSTICIERA  |
| <b>Date of birth</b>                                                                                  | 02-APR-2024                                                                                                                                                                                                                         | <b>Chip no.</b> | 784098100075507 |
| <b>UELN /Life no./<br/>Reg. no.</b>                                                                   | 784 - 001 - 000027958                                                                                                                                                                                                               |                 |                 |
| <b>Sex</b>                                                                                            | FEMALE                                                                                                                                                                                                                              |                 |                 |
| <b>Breeder</b><br>(incl. country)                                                                     | FEDERICO JOSE MORALES JORDAN, UNITED ARAB EMIRATES                                                                                                                                                                                  |                 |                 |
| <b>Owner</b><br>(full name + address +<br>contact details)                                            | FEDERICO JOSE MORALES JORDAN<br>PO BOX 119000<br>DUBAI<br>UNITED ARAB EMIRATES                                                                                                                                                      |                 |                 |
| <b>Veterinarian</b><br>(full name + address<br>+ registration/license<br>number + contact<br>details) | Dr. KARTHIKEYAN DAKSHINAMOORTHY<br>PO BOX 9373, ZABEEL 2,<br>DUBAI EQUINE HOSPITAL, DUBAI, UNITED ARAB EMIRATES<br>LICENSE NO DXB-APH 04-1761932<br>T: +971 4 3178888, <a href="mailto:info@dubaiequine.ae">info@dubaiequine.ae</a> |                 |                 |

Herewith, I confirm that the above-described horse complies with the ECAHO Blue Book, Rules for Conduct of Shows (RCS ) article 32 concerning Hereditary disorders:

☒ The horse complies with the Blue Book, Rules for Conduct of Shows, art. 32 a) Overbite/underbite

7th OCT 2025

Date of issue



Stamp and signature of the veterinarian