

### Horse Deceased Notification

(VIC/QLD/WA/SA/NT/TAS)

# Horse Deceased Notification (VIC/QLD/WA/SA/NT/TAS)

#### Which horses does this form apply to?

- · Unnamed horses (i.e. FOD lodged but not registered to race).
- · Named horses (i.e. registered to race).

#### When do I have to lodge this form?

- · Within 48 hours of the death of an unnamed horse.
- Within 24 hours of the death of a named horse which has not been retired from racing.

#### Do any exemptions apply?

You do not have to lodge this form if the trainer of the horse (if applicable) notifies Racing Australia.

#### How do I lodge this form once completed?

- Email: traceability@racingaustralia.horse
- Post: Racing Australia, Service Centre, Level 1, 400 Epsom Road, Flemington VIC 3031
- Online: https://myhorseracing.horse

#### Why do I have to lodge this form?

It is required under AR 292 (unnamed horses) and AR 299 (named horses) to enable traceability of horses throughout their lives to ensure positive welfare outcomes.

#### How will my personal information be used?

The personal information collected in this form may be used by Racing Australia and the Principal Racing Authorities to identify and communicate with owners and to facilitate the administration of racing. It may also be used or disclosed by Racing Australia in accordance with its Privacy Policy (<a href="https://racingaustralia.horse/AboutUs/PrivacyPolicy.aspx">https://racingaustralia.horse/AboutUs/PrivacyPolicy.aspx</a>). The Privacy Policy also sets out how owners can access and seek correction of their personal information, as well as how to make complaints regarding Racing Australia's handling of their personal information.

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| ASSTRALIA   |   |   | (VIC/QLD/WA/SA/NT/TAS                   |
|---|---|---|---|
| PART A - Horse Details  |   |   |   |
| Horse Name (including suffix)   | Date De                                     | ceased (dd/mm/yyyy) Microchip                         | Foal Date (dd/mm/yyyy)                  |
| Sire  | Dam   |   |   |
| PART B – Submitted by   |   |   |   |
|   |   |   |   |
| First Name  | Last Name                                   |   |   |
| Email * Mobile or Email MUST be supplied.   | Mobile * Mobile or Ema                      | ail MUST be supplied.                                 |   |
| PART C – Deceased Notification  |   |   |   |
| Did the injury/incident leading to the death of this horse occur whilst in work (trackwork, jump-outs, trials, race day)? |   | 3. Reason for Death (Select one of the options below) |   |
| Yes   | a. Natural causes                           |   |   |
| No  | b. Sudden collapse                          |   |   |
| 2. Select one of the options below  | c. Cranial/vertebral injury                 |   |   |
| a. Found deceased   | d. Catastrophic limb injury                 |   |   |
| b. Euthanised by vet  | e. Condition/illness/disease                |   |   |
| c. Euthanasia   | f. Unsuitable for rehoming soundness/injury |   |   |
| d. Sent to an Abattoir or Knackery  |   | g. Unsuitable for rehoming behavior/temperament       |   |
|   |   | h. Injury (other) (please specify                     | <i>(</i> )                              |
| Important Note: the horse must not be dispose provided to that PRA. Local rule 94C applies for                            |   |   | ary certificate as to cause of death is |
| Abattoir / Knackery   | r violonari bacca participant               |   |   |
| Business Name   | Email                                       | Mobile  |   |
| PART D – Managing Owner / Authorised A  | gent Details                                |   |   |
| First Name  | Last Name                                   |   |   |
| Email   | Mobile.                                     |   |   |
| Declaration   |   |   |   |
| I declare that:   |   |   |   |
| 1 Lam authorized by the aumore of the berne to  | ladge this form                             |   |   |

- 1. I am authorised by the owners of the horse to lodge this form.
- 2. The information provided in this form is true and correct to the best of my knowledge, and acknowledge that I may be subject to penalty for providing any false or misleading information.

I am the Managing Owner or I am the Authorised Agent

Signature

Date (dd/mm/yyyy)

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