



Westfalen North America

Duplicate Passport Request

Horse: _____ Previous Name: _____

Reg. # _____ USEF# _____

Sire: _____ Dam: _____

Damsire: _____ Date of Birth: _____

Description/Color: _____

Microchip # _____ Brand # (if known) _____

Microchip Verified by: _____

Past Owners / Breeder: _____

Current Owner: _____

Address: _____

City/State/Zip: _____

Phone: _____ Email: _____

Explanation of Loss of Passport: _____

Owner Signature: _____ **Date:** _____

Notary: _____ **Date:** _____

Fill out all known information above, sign and notarize. Please attach a bill of sale or other proof of ownership, and send or email/fax to: Westfalen NA P.O. Box 429 Murdo SD, 57559 office: 605-669-2200 fax: 605-734-8060 office@westfalen-na.com