THE HARTFORD
LIVESTOCK DEPARTMENT
(800)-295-1815
www.hartfordlivestock.com

Substantiation of Value
Cattle

THE HARTFORD

This document forms part of the Animal Mortality Application

Applicant's Name		Policy Number:	
Mail Address		Animal Name:	
City, ST Zip		Purchase Price:	$
Phone		Purchase Date:	
Fax		Amount of	
E-Mail Address		Insurance Desired:	$

Breed _____ Use _____ Sex _____ Date of Birth _____
Sire: _____ Dam: _____ Registration Number _____

Show / Performance Record(s)

Show / Competition	Show Rating **N**=National **D**=District **R**=Regional **C**=County **S**=State **L**=Local	Date of Show	Class / Division	Number of Entries	Placement	Winnings	Number of Points
						$	
						$	

Bull Record

A.I.	Number of Collected Units of Usable Semen:	Number of Units Stored:	Number of Units Sold:	Price per Unit Sold:
Last Year:				$
Current Year:				$
Projected Next Year:				$

Natural Breeder – Number of Successful Matings

Last Year:	Breeding Fee:	Current Year:	Breeding Fee:	Next Year:
	$		$	

Female Record

	Number of Times Flushed Last 12 Months	Total Number of Embryos Collected	Number of Embryos Stored:	Total Number of Embryos Sold	Price per Embryo Sold:
Last Year:					$
Current Year:					$
Projected Next Year:					$

Number of Calves Sold Since Owned: _____ Average Selling Price: $_____

Dairy Cattle

Please provide milk production records. (Based on last completed lactation)

Supporting Pricing of Siblings/Half Siblings

Number of Calves		Average Selling Price of	
Sold Since Owned	Average Selling Price	Full Siblings	Half Siblings
	$	$	$

Training Record(s) (If Applicable)

Name of Trainer	Type of Training	Cost of Training (Excluding Board, Vet and Maintenance Fees)		
		Per Month	Number of Months	Total Cost
				$
				$

Applicant declares the above statements are true and complete, and that no material information was withheld.

Applicants Signature	Date: