



International Colored Appaloosa Association, Inc

PO Box 427, Whiteface, TX 79379
www.icaainc.com icaa@icaainc.com

Affidavit for Duplicate Certificate

PLEASE READ INSTRUCTION CAREFULLY

- Part I (on Page 1) must be completed in its entirety by the owner as recorded with ICAA
- Part II (on Page 2) must be completed only if lost by someone other than the owner as recorded with ICAA
- Must include four (4) current photographs (full body right side, full body left side, full front with forelock pushed aside and full rear shot). Also, include close-ups of any brands, scars, or other identifiers such as small leg markings that do not show up well in the full body photos.
- Photos will be compared with photos already on file
- ICAA retains the right to require additional information and/or photographs before issuing a duplicate certificate
- Include Duplicate Certificate fee of \$10 for current members or \$25 for non-members
- **Signature(s) must be notarized**
- If you are the current owner but not the recorded owner as per ICAA records, there must be a Transfer Report signed by the last recorded owner as seller submitted with this affidavit.

Please regard this affidavit as a request for issuance of a duplicate Registration Certificate for:

Horse's Registered Name: _____ ICAA Registration # _____

Part I: To be completed in all instances by recorded owner.

I, _____, as current recorded owner of the horse identified in this affidavit, hereby affirm that the sentence marked below describes the circumstances surrounding the loss or destruction of the Registration Certificate for the horse listed above.

One of the boxes below must be marked in order for us to proceed.

- I lost the Registration Certificate
- I never received the Registration Certificate from ICAA
- I mailed or delivered the Registration Certificate to: Name/Address: _____
- Other (please explain): _____

The undersigned agrees to indemnify and hold harmless ICAA from any and all liability, whenever or however arising, by virtue of its reliance on this affidavit and its issuance of the replacement Registration Certificate; agrees to defend ICAA at his/her expense; and if judgment is made against ICAA, to pay judgment and to obtain written release in form acceptable to ICAA.

I further agree that if the original Registration Certificate is located or returned to my possession, to surrender or secure its surrender to the ICAA.

Signature of Recorded Owner: **X** _____ Printed Name: _____

Mailing Address: _____

Phone: _____ Email: _____ ICAA Member # _____

Subscribed and sworn to before me on this _____ day of _____ 20____ **(Notary Seal)**

Notary Public Signature **X** _____

My commission expires: _____

County of: _____ State of: _____

Horse's Registered Name: _____ ICAA Registration # _____

Part II: To be completed in addition to Part I, if the Registration Certificate was not lost by the recorded owner.

I, _____, hereby affirm that the sentence marked below describes the circumstances surrounding the loss or destruction of the Registration Certificate for the horse listed above.

One of the boxes below must be marked in order for us to proceed.

- I lost the Registration Certificate
- I never received the Registration Certificate from ICAA
- I mailed or delivered the Registration Certificate to: Name/Address: _____
- Other (please explain): _____

The undersigned agrees to indemnify and hold harmless ICAA from any and all liability, whenever or however arising, by virtue of its reliance on this affidavit and its issuance of the replacement Registration Certificate; agrees to defend ICAA at his/her expense; and if judgment is made against ICAA, to pay judgment and to obtain written release in form acceptable to ICAA.

I further agree that if the original Registration Certificate is located or returned to my possession, to surrender or secure its surrender to the ICAA.

Signature of Person making this statement: **X** _____

Printed Name: _____

Mailing Address: _____

Phone: _____ Email: _____ ICAA Member # _____

Subscribed and sworn to before me on this _____ day of _____ 20____ **(Notary Seal)**

Notary Public Signature **X** _____

My commission expires: _____

County of: _____ State of: _____

Submit all required documents, photos and fee to ICAA at PO Box 427, Whiteface, TX 79379. Photos should also be emailed to icaa@icaainc.com.