

# National Rottweiler Council (Australia)

## DENTAL CERTIFICATE

State or Territory of Issue WA

004214

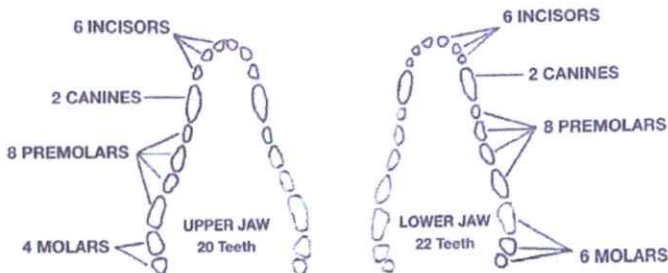
Dog's Registered Name: Yamix Remembrance Lone Pine  
 Date of Birth: 11 / 11 / 18 Sex  Male / Female (Delete as appropriate)  
 Registration Number: 8010006773 Microchip / Tattoo Number: 953010002506400

### DENTITION

Full Dentition (42)

Yes     No

(tick which)



Please indicate any missing teeth on diagram.

If additional teeth are present please note: \_\_\_\_\_

### BITE: Please initial or sign in the shaded area of the correct box

<p><b>SCISSORS BITE</b></p> <div style="text-align: center; border: 1px solid black; padding: 2px; margin-bottom: 5px;"><u>Ph.</u></div> <p style="font-size: small;">Position of 1, 2, incisors</p>	<p><b>LEVEL BITE</b></p> <p style="font-size: small;">Position of 1, 2, incisors</p>
<p><b>OVERSHOT BITE</b></p> <p style="font-size: small;">Position of 1, 2, incisors</p>	<p><b>UNDERSHOT BITE</b></p> <p style="font-size: small;">Position of 1, 2, incisors</p>

Any deviation from the above please comment: Eg. Wry Mouth, etc: MALOCCLUSION 206 + 30106  
TEETH.

I hereby certify that the information contained in this Certificate is true and correct to the best of my professional knowledge at the time of examination.

Veterinary Surgeon submitting information: Dr Ian Hainsworth V2452  
 Address: 30 Wandagara cres Mundaring  
 Signature: [Signature] Date of Examination 10 / 1 / 2020

Owner's Name: Ms. N Cartwright  
 Address: 4 Snipe Ct, High Wycombe WA 6057 Phone No.: ( ) 0406745611

Please forward BLUE copy to NRCA Breed Recorder:  
 Name: S. Baird  
 Address: Po Box 1102, Grovedale VIC 3216

And YELLOW Copy to State Club  
 White: Owner's Original    Blue: NRCA Breed Recorder Copy    Yellow: State Club Copy