

National Rottweiler Council (Australia)

DENTAL CERTIFICATE

State or Territory of Issue South Australia

04493

Dog's Registered Name: JAPJOVE DELAWARE SLIDE

Date of Birth: 4 / 3 / 2021

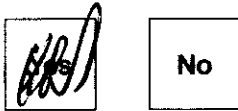
Sex: ~~Male~~ / Female (Delete as appropriate)

Registration Number: 8010007296

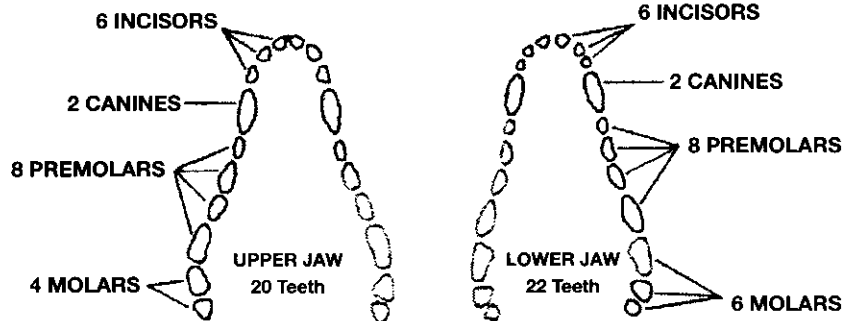
Microchip / Tattoo Number: 953010004561203

DENTITION

Full Dentition (42)



(tick which)

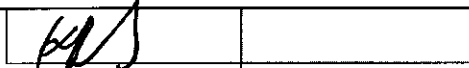


Please indicate any missing teeth on diagram.

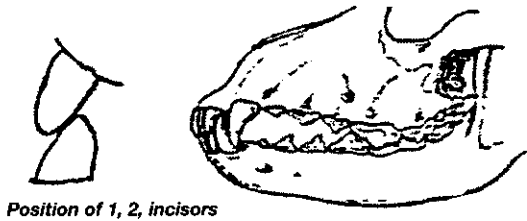
If additional teeth are present please note: _____

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

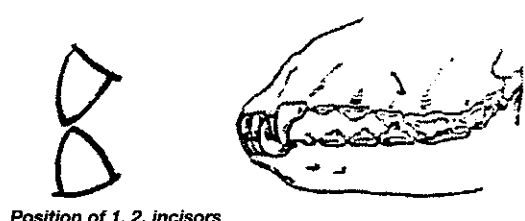
SCISSORS BITE



LEVEL BITE



Position of 1, 2, incisors



Position of 1, 2, incisors

OVERSHOT BITE



UNDERSHOT BITE



Position of 1, 2, incisors



Position of 1, 2, incisors

Any deviation from the above please comment: Eg. Wry Mouth, etc: _____

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 Kim Smith
 Address: Leitchfield Vet Hospital PO Box 600 Leitchfield NT 0839
 Signature: [Handwritten Signature] Date of Examination 17/11/21

Owner's Name: Mrs K Nixon
 Address: PO Box 621, Humpty Doo NT 0836 Phone No.: () 0412590386

Please forward BLUE copy to NRCA Breed Recorder:
 Name: Susie Baird
 Address: PO Box 1102, Georgetown DC 3216 VIC

And YELLOW Copy to State Club 26 AUS Ct, Viewbank SA
 White: Owner's Original Blue: NRCA Breed Recorder Copy Yellow: State Club Copy