

National Rottweiler Council (Australia)

DENTAL CERTIFICATE

State or Territory of Issue WA

004214

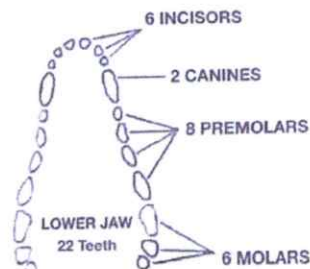
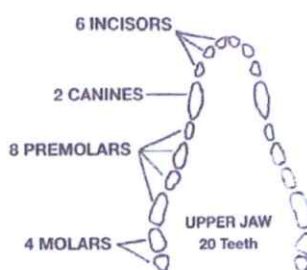
Dog's Registered Name: Yamix Remembrance Lone Pine
 Date of Birth: 11 / 11 / 18 Sex Male / Female (Delete as appropriate)
 Registration Number: 8010006773 Microchip / Tattoo Number: 953010002506400

DENTITION

Full Dentition (42)



(tick which)



Please indicate any missing teeth on diagram.

If additional teeth are present please note: _____

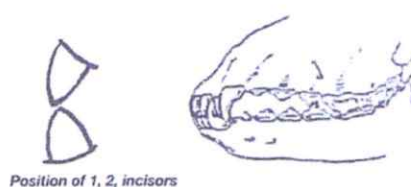
BITE: Please initial or sign in the shaded area of the correct box

SCISSORS BITE

Ph.



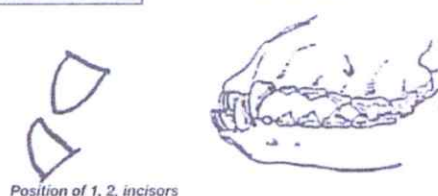
LEVEL BITE



OVERSHOT BITE



UNDERSHOT BITE



Any deviation from the above please comment: Eg. Wry Mouth, etc: MALOCCLUSION 206 + 36106
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 Wandegara cres Mundaring
 Signature: [Signature] Date of Examination 10 / 1 / 2020

Owner's Name: Ms. N Cartwright
 Address: _____ Phone No.: () 0406745611

Please forward BLUE copy to NRCA Breed Recorder:

Name: G. 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