
(Date)

**GARDEN STATE HORSE SALES COMPANY
NOTICE OF INSURANCE COVERAGE**

The purchaser, or his duly authorized agent, has arranged with the firm named below to insure the following named horse(s). It was agreed that the horse(s) will be insured for full mortality (without any deductible or other exclusions, unless otherwise agreed in writing) for the sale price of the named horse(s) purchased at Garden State Horse Sales Company's auction. It was further agreed that Garden State Horse Sales Company will be named loss payee (beneficiary) until such time that all amounts due for the purchase of said horse(s) is paid in full. The undersigned insurance company/agency hereby agrees to furnish Garden State Horse Sales Company with a copy of the Certificate of Insurance and will, also, advise Garden State Horse Sales Company of any changes made to the policy during the term that Garden State Horse Sales Company is the loss payee and hereby agrees to indemnify Garden State Horse Sales Company for any loss resulting from its failure to so advise Garden State Horse Sales Company. The undersigned insurance company/agency will also notify Garden State Horse Sales Company, in writing, of any changes relating to the policy of insurance as long as Garden State Horse Sales Company is the loss payee.

HIP NO.	NAME OF HORSE	SALE PRICE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Insurance Company/Agency - Name
and Address**

(Insurance Company/Agency Representative)

X _____
(Signature)