

**KENILWORTH QUARANTINE STATION  
EXPORTER READINESS SURVEY**

NO.	NAME OF HORSE	BREED	COUNTRY OF DESTINATION	CURRENT LOCATION	PREFERED DATE OF DEPARTURE	PASSPORT TYPE	DATE OF LAST AHS VACCINATION
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

Note:

Further detail will be requested before entry into the AHS Free Zone.