

# Marshall & Sterling

**INSURANCE**  
**EQUISPORT DIVISION**

1113 Holland Street  
Birmingham, MI 48009  
800-432-1215  
Fax: 248-644-1404  
Email: Contact@equisportagency.com

## VALUE SUBSTANTIATION SUPPORT FORM

Name of Insured: \_\_\_\_\_

Name of Horse: \_\_\_\_\_

**Training Record** (Include training fees only. Do not include, board, vet, farrier or other charges)

Name of Trainer: \_\_\_\_\_ Type of Training: \_\_\_\_\_

Number of days a week in training : \_\_\_\_\_ Charge per month: \_\_\_\_\_

### Show Record

Date of Show	Name of Show	Division	Class	Place in Class

\* Attach a separate page if needed

### For Pleasure Horses:

How often is horse ridden? \_\_\_\_\_ How many lessons are taken a week? \_\_\_\_\_

Do you jump horse? \_\_\_\_\_ What type of riding is done? \_\_\_\_\_

Please provide any additional information that substantiates the insured value you have requested: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_