

**DELAWARE HARNESS RACING COMMISSION
REGISTRATION OF DELAWARE OWNED HORSE**

PLEASE PRINT CLEARLY

ALL QUESTIONS MUST BE ANSWERED

1) NAME OF HORSE _____

2) NAME OF OWNER(S) **EACH OWNER MUST FILE A SEPARATE DELAWARE OWNER REGISTRATION FORM. PLEASE INDICATE PERCENTAGE FOR EACH OWNER**

_____ %

_____ %

3) NAME OF PERSON(S) FROM WHOM HORSE WAS PURCHASED _____

4) DATE OF PURCHASE _____ 5) LOCATION OF PURCHASE _____

6) WAS HORSE CLAIMED? _____ DATE _____ WHAT TRACK _____

7) DATE OF USTA TRANSFER _____ 8) PURCHASE PRICE FOR HORSE _____

(a) WILL THE PURCHASE PRICE BE PAID OVERTIME BEYOND TODAY'S DATE? _____

(b) WILL THE PURCHASE PRICE BE PAID THROUGH EARNINGS BEYOND TODAY'S DATE? _____

(c) IF THE PURCHASE PRICE WAS PAID WITH BORROWED FUNDS WHO WAS THE LENDER?

9) EXCEPT FOR INDUSTRY STANDARD/TRAINING AND DRIVING FEES, HAVE ANY MANAGEMENT FEES, AGENT FEES, CONSULTING, OR ANY OTHER FORM OF COMPENSATION BEEN PAID, OR IN THE FUTURE WILL BE PAID TO A NON-RESIDENT OF DELAWARE IN CONNECTION WITH THIS HORSE? _____

10) IS THIS HORSE CURRENTLY UNDER LEASE? _____ YES _____ NO

IF THE ANSWER IS "YES", LIST THE NAMES AND ADDRESSES OF THE LESSOR(S) AND LESSEE(S)

LESSOR(S)

LESSEE(S)

I HEREBY SWEAR OR AFFIRM THAT ALL OF THE FOREGOING INFORMATION IS TRUE, AND I UNDERSTAND THAT ANY INCORRECT, UNTRUTHFUL OR FRAUDULENT INFORMATION PROVIDED ON THIS FORM MAY SUBJECT ME TO CRIMINAL AND ADMINISTRATIVE PENALTIES INCLUDING, BUT NOT LIMITED TO A MINIMUM FINE OF \$5,000 AND A MANDATORY TWO-YEAR REVOCATION OF MY HORSEMAN'S LICENSE.

PRINT NAME

SIGNATURE OF OWNER OR THEIR LICENSED AGENT

ADDRESS

DATE

PHONE NUMBER

CELL PHONE NUMBER

BILL OF SALE OR PROOF OF PURCHASE MUST ACCOMPANY EACH FORM

Send to DHRC License Investigator clare.espino@delaware.gov

APPROVED BY: _____ DHRC DATE: _____

Entered on Delaware Owned List on _____ (Date)