International Chincoteague Pony Association & Registry

DUPLICATE CERTIFICATE FORM
FORM A

Instructions:

1. Print in ink only (please write legibly).
2. **FORM A can ONLY be completed by the CURRENT RECORDED OWNER ON FILE with ICPAR**
3. FORM B is only required IF the original registration certificate was lost by someone other than the recorded owner
4. **Five full-view color photographs (front, back, R side, L side, full face) are required in all instances.**
5. If change in ownership needs to be made, please include properly completed transfer report and fees
6. The certificate will be mailed to the address on file for the record owner unless a transfer of ownership is submitted with this request, or an alternate address is provided.
7. ICPAR retains the right to require additional information and/or photographs before issuing a duplicate certificate.

Duplicate Certificate Form Fee: $35 **Make checks payable to**: *International Chincoteague Pony Association & Registry*

Pony's Registered Name:_____ICPAR Reg. #_____

As the recorded owner, or authorized agent, of the Chincoteague Pony stated above, I_____ , hereby affirm that the sentence marked below describes the circumstances surrounding the loss or destruction of the certificate for the pony identified above.

One of the boxes below must be filled in:

☐ I lost the certificate.

☐ I mailed or delivered the certificate to: Name_____Address_____

☐ Other (Please Explain): _____

Owner Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

All information is correct to the best of my knowledge and belief as certified by my written signature. I agree to indemnify and hold harmless ICPAR from any and all liability, whenever or however arising, by virtue of its reliance on this statement and its issuance of the replacement certificate; agrees to defend ICPAR at his expense; and if judgement is made against ICPAR, to pay judgement and obtain written release in form acceptable to ICPAR. Any fraudulent statements herein automatically cancel registration. By submitting this application and accepting the benefits of transacting business with the ICPAR, I hereby subject myself to all the provisions of the By-Laws, Rules and Regulations, Code of Conduct & Grievence Policy, and the Privacy Policy of the International Chincoteague Pony Association & Registry LLC, as they now exist or may, from time to time, be amended. Knowledge of which I currently have or will immediately acquire from the Registry by emailing ***chincoteagueponyassociation@gmail.com*** or online at ***chincoteagueponyassociation.com***.

_____

Signature of Recorded Owner Date ICPAR ID #

Mail completed form with photographs and payment to the following address:

International Chincoteague Pony Association & Registry
10723 County Road 11 NE
Elgin, MN 55932