

PLEASE COMPLETE AND RETURN THIS SIGNED DOCUMENT TO STH-HIPAVIA BY EMAIL to :  
exploitation@sth-hipavia.com

[www.sth-hipavia.com](http://www.sth-hipavia.com)



Tel : +33 (0)3 44 21 26 01

**ROAD SHIPPING ORDER**

**DATE OF ORDER :**

**DATE OF TRANSPORT :**

**NAME OF THE INSTRUCTING PARTY or his/her representative :**

Owner	<input type="text"/>	Trainer	<input type="text"/>	Stud Farm	<input type="text"/>
Bloodstock Agent	<input type="text"/>	Other (specify)	-----		

**TELEPHONE :**

**FAX or E-MAIL :**

**NATURE OF TRANSPORT :**

BREEDING	<input type="text"/>	SHUTTLE	<input type="text"/>	SALES	<input type="text"/>
RACES	<input type="text"/>	Other (specify)	-----		

**ADDITIONAL SERVICES :**

Exclusive Lorry	<input type="text"/>	Double Stall	<input type="text"/>	Box	<input type="text"/>
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**NAME & SEX OF THE HORSES :**

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**PLACE OF BORDING :**

**ADDRESSEE & PLACE OF DELIVERY :**

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**OBSERVATIONS :**

**BILLING NAME & ADDRESS :**

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**In the absence of an invoicing label, the invoice shall be drawn up in the name of the instructing party, who shall be responsible for re-invoicing where necessary**

*I, the undersigned, recognize having read the general conditions for transport*

**SIGNATURE OF THE INSTRUCTING PARTY or his/her representative :**

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