



BloodStock SA • 46 LENNOX ROAD, WINDERMERE, 4001, SOUTH AFRICA
• Tel: +27(0)31 309 5522 • Email: bsa@bsa.co.za

Sale: _____ Year: **2022**

Authorisation of Agent

To: BloodStock South Africa

Gentlemen:

I, the undersigned, hereby appoint _____ to be my **AUTHORISED AGENT** in all matters pertaining to the sale and/or purchase of horses at the **above-mentioned sale** to be conducted by your Organisation on the _____ **day of** _____ **2022**. This authorisation is subject to a limitation of expenditure to the amount of **Rand (ZAR) R** _____.

I agree to be bound in all respects by all actions of the abovementioned Agent, acting on my behalf, including but not limited to: *Execution of all documents pertaining to such sale or purchase; granting of security interests; receipt and disbursements of funds; waiver of rights under consignor's contract; Conditions of Sale or Law; acceptance of goods; and right to make representations regarding any animal.*

I agree to pay for all horses purchased by said Agent on my behalf in accordance with the Association's Conditions of Sale.

I agree that this **authorisation shall be revocable only in writing**, such revocation to become effective only when acknowledged in writing by the Thoroughbred Breeders' Association.

If the abovementioned agent is to act on behalf of another person, a copy of the Principal's Identity document and proof of residence is required. If the abovementioned agent is to act on behalf of a company or close corporation, the letter of authority must appear on the letterhead of the company and must be accompanied by a certified resolution authorising him/her to do so.

Surname:			
First Name/s:			
ID /Passport No:		Vat No:	
Physical Address:			
		Postal Code:	
Postal Address:			
		Postal Code:	
Tel Number:		Mobile:	
Fax Number:			
E-Mail:			

Signature: _____ Date: _____

AGENTS AND TRAINERS ARE ADVISED TO OBTAIN WRITTEN AUTHORISATION WHEN PURCHASING HORSES ON BEHALF OF CLIENTS

NB: Person giving this authorisation must also complete and submit a BUYER'S CARD APPLICATION FORM