



TRIANGLE EQUINE

MOBILE VETERINARY SERVICES

Office: (919) 460-6300 fax: (919) 460-8720 info@triangleequine.com

PRE-PURCHASE BUYER INFORMATION

Date: _____

Buyer Present? Yes No

Buyer's Information:

Name:

Phone:

Address:

Email:

Buyer's agent:

Phone:

Email:

Seller's name/Agent:

Phone:

Email:

Horse's Information:

Barn name:

Breed:

Registered name:

Gender:

Show Name:

Birth date or age:

Color:

What are your goals for this horse?

Does the purchase price/value of this horse meet or exceed \$100,000? Yes No

Date of pre-purchase exam: _____

Please have seller forward any records or radiographs to info@triangleequine.com prior to the appointment.

Also forward the sales ad to this email address prior to the appointment.

****Be aware that our Pre-purchase exam will usually include a riding portion. Please ensure that someone will be dressed appropriately to ride the horse, and that tack is easily available.****

It is a policy of Triangle Equine to obtain your credit card information prior to the time of your appointment. As always, we are happy to accept payment by check, cash or money order at the time of the appointment. Otherwise, your credit card will be charged the total amount due the same day of the pre-purchase exam. By signing this information form, you authorize our staff to run your credit card if payment is not received at the time of the appointment.

Type of card: MasterCard VISA

Credit card number: _____ CV# _____

Exp.Date: _____

Name on card: _____

Billing address, if different from above:

Signature of Buyer/Agent: _____

Date: _____