

# (Harness) Standardbred Transfer of Ownership

R111-A

HRA Rule 111. (1) A change in the ownership of a registered horse or notified foal shall be made in accordance with this rule. (2) Within 7 days of agreeing to the change or prior to the horse next racing whichever is earlier or such other time as the Controlling Body may determine the transferee shall make application to the Controlling Body to register the change. (3) An application under this rule shall be made in the manner and form, and be accompanied by the horse's registration certificate and such other documentation, information and fees as the Controlling Body may determine. (4) The Controlling Body may register or refuse to register the change. (5) A change becomes effective on registration. (6) The Controlling Body may cancel the registration of a change and it thereupon becomes ineffective.

HRA Rule 112. (1) A person who fails to comply with a provision of rule 109 or rule 110 or rule 111 is guilty of an offence. (2) Where an offence is committed under rule 109 or rule 110 or rule 111 the Controlling Body may take such action with regard to the horse concerned in the offence and take such action with regard to the registration of the ownership in the horse as it may determine. (3) The Controlling Body may register or cancel the registration of notification of a lease, or approve an event of the type described in sub rule 110 (1) or register or cancel the registration of a change in the ownership of a horse, on the basis of such documentation or information as it considers suitable and notwithstanding the failure of any person to comply with a provision of rule 109 or rule 110 or rule 111.

SECTION	N A: TO BE COMPLETED B	Y PREVIOUS OWNER(S)/S	ELLER(S)		
This is to advise that on	date	I/We ha	I/We have disposed of the horse		
Name of Horse, or if un-named, bre	eding and year of foaling:				
Certificate Number:		Purchase Price \$:			
t	o the person(s) listed in SECT	ION B of this form (purchase	rs)		
	SELLER(S) T	O COMPLETE			
NAME OF SELLER	SIGNATURE OF SELLER	NAME OF WITNESS	SIGNATURE OF WITNESS		
(name in full – BLOCK letters)		(name in full – BLOCK letters)			
1.					
2.					
3.					
1.					
5.					
5.					
7.					
3.					
9.					
10.					
SELLER'S S	IGNATURE MUST BE WIT	NESSED OR FORM WIL	I BE INVALID		

\*\*\*\*\* Pay the application fee as per the current fee schedule:

https://www.qric.qld.gov.au/licensing-and-ownership/schedule-of-fees-and-charges/

## **HOW TO PAY**

QRIC provides credit card payment through BPoint, an easy and secure online payment portal. Refer to the payment options on our website for details on how to make payment.

https://www.qric.qld.gov.au/payment-options/

QRIC/2016/2853 V1.01

Refer to the Commission's privacy policy on our website.

Queensland Racing Integrity Commission ABN: 64 838 583 571 PO Box 15666 CITY EAST QLD 4002

Phone: 1300 087 021

Email: licensing@qric.qld.gov.au

Website: www.qric.qld.gov.au

Office Hours: 8:30am to 4:00pm, Mon-Fri Closed public holidays



## SECTION B: NEW OWNER(S) TO COMPLETE

#### **DECLARATION**

This is to certify that I/we have acquired the horse described hereon and I/we hereby agree to abide by the Rules and Regulations of Harness Racing. I/We hereby declare that I/we are over the age of 18 years and I/we are the only person(s) who have any interest whatsoever in this horse and I/we further declare that all particulars contained on this form are true and correct. The first named person will be regarded as the Partnership Manager for racing purposes and all correspondence and payments shall be sent to that person unless otherwise stated. The Partnership Manager is not empowered to sign documents on behalf of the other partners. Prizemoney is managed and facilitated the control body and owners should contact Racing Queensland to make any commercial arrangements such as banking information.

1.	SURNAME OR COMPANY NAME (MANAGER)		GIVEN NAMES	%	OWNERSHIP
MR MRS MISS	<u> </u>				
DATE OF BIRTH	HOME PHONE	MOBILE	EMAIL		
RESIDENTIAL ADDRESS		,		SIGNATURE	
2. MR MRS MISS	SURNAME OR COMPANY NAME		GIVEN NAMES	. %	OWNERSHIP
DATE OF BIRTH	HOME PHONE	MOBILE	EMAIL		
RESIDENTIAL ADDRESS		L	<u> </u>	SIGNATURE	
•	SURNAME OR COMPANY NAME		GIVEN NAMES	9/	OWNERSHIP
3. MR MRS MISS				70	OWNEROIII
DATE OF BIRTH	HOME PHONE	MOBILE	EMAIL		
RESIDENTIAL ADDRESS			<u> </u>	SIGNATURE	
4.	SURNAME OR COMPANY NAME		GIVEN NAMES	%	OWNERSHIP
MR MRS MISS DATE OF BIRTH	HOME PHONE	MOBILE	EMAIL		
RESIDENTIAL ADDRESS			<u> </u>	SIGNATURE	
5. MR MRS MISS	SURNAME OR COMPANY NAME		GIVEN NAMES	%	OWNERSHIP
DATE OF BIRTH	HOME PHONE	MOBILE	EMAIL	·	
RESIDENTIAL ADDRESS			l .	SIGNATURE	
6.	SURNAME OR COMPANY NAME		GIVEN NAMES	%	OWNERSHIP
MR MRS MISS	LUCKERUSKE	LMODILE	I EMAIL		
DATE OF BIRTH	HOME PHONE	MOBILE			
	HOME PHONE	MOBILE		SIGNATURE	
RESIDENTIAL ADDRESS	HOME PHONE	MOBILE		SIGNATURE	
RESIDENTIAL ADDRESS	SURNAME OR COMPANY NAME	MODILE	GIVEN NAMES		OWNERSHIP
RESIDENTIAL ADDRESS		MOBILE			OWNERSHIP
RESIDENTIAL ADDRESS  7.  MR MRS MISS	SURNAME OR COMPANY NAME		GIVEN NAMES		OWNERSHIP
RESIDENTIAL ADDRESS  7.  MR MRS MISS  DATE OF BIRTH  RESIDENTIAL ADDRESS	SURNAME OR COMPANY NAME  HOME PHONE		GIVEN NAMES  EMAIL	% SIGNATURE	
RESIDENTIAL ADDRESS  7.  MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS  8.	SURNAME OR COMPANY NAME		GIVEN NAMES	% SIGNATURE	OWNERSHIP OWNERSHIP
RESIDENTIAL ADDRESS  7.  MR MRS MISS  DATE OF BIRTH  RESIDENTIAL ADDRESS	SURNAME OR COMPANY NAME  HOME PHONE		GIVEN NAMES  EMAIL	% SIGNATURE	
RESIDENTIAL ADDRESS  7.  MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS  8.  MR MRS MISS	SURNAME OR COMPANY NAME  HOME PHONE  SURNAME OR COMPANY NAME	MOBILE	GIVEN NAMES  EMAIL  GIVEN NAMES	% SIGNATURE	
RESIDENTIAL ADDRESS  7.  MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS  8.  MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS	SURNAME OR COMPANY NAME  HOME PHONE  SURNAME OR COMPANY NAME  HOME PHONE	MOBILE	GIVEN NAMES  EMAIL  GIVEN NAMES  EMAIL	SIGNATURE %	OWNERSHIP
RESIDENTIAL ADDRESS  7. MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS  8. MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS  9. MR MRS MISS	SURNAME OR COMPANY NAME  HOME PHONE  SURNAME OR COMPANY NAME  HOME PHONE  SURNAME OR COMPANY NAME	MOBILE	GIVEN NAMES  EMAIL  GIVEN NAMES  EMAIL  GIVEN NAMES	SIGNATURE %	
RESIDENTIAL ADDRESS  7.  MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS  8.  MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS  9.	SURNAME OR COMPANY NAME  HOME PHONE  SURNAME OR COMPANY NAME  HOME PHONE	MOBILE	GIVEN NAMES  EMAIL  GIVEN NAMES  EMAIL	SIGNATURE %	OWNERSHIP
RESIDENTIAL ADDRESS  7. MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS  8. MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS  9. MR MRS MISS	SURNAME OR COMPANY NAME  HOME PHONE  SURNAME OR COMPANY NAME  HOME PHONE  SURNAME OR COMPANY NAME	MOBILE	GIVEN NAMES  EMAIL  GIVEN NAMES  EMAIL  GIVEN NAMES	SIGNATURE %	OWNERSHIP
RESIDENTIAL ADDRESS  7.  MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS  8.  MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS  9.  MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS  DATE OF BIRTH  RESIDENTIAL ADDRESS  10.	SURNAME OR COMPANY NAME  HOME PHONE  SURNAME OR COMPANY NAME  HOME PHONE  SURNAME OR COMPANY NAME	MOBILE	GIVEN NAMES  EMAIL  GIVEN NAMES  EMAIL  GIVEN NAMES	SIGNATURE % SIGNATURE %	OWNERSHIP
RESIDENTIAL ADDRESS  7.  MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS  8.  MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS  9.  MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS	SURNAME OR COMPANY NAME  HOME PHONE  SURNAME OR COMPANY NAME  HOME PHONE  SURNAME OR COMPANY NAME  HOME PHONE	MOBILE	GIVEN NAMES  EMAIL  GIVEN NAMES  EMAIL  GIVEN NAMES  EMAIL	SIGNATURE % SIGNATURE %	OWNERSHIP
RESIDENTIAL ADDRESS  7.  MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS  8.  MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS  9.  MR MRS MISS DATE OF BIRTH  RESIDENTIAL ADDRESS  10.  MR MRS MISS	SURNAME OR COMPANY NAME  HOME PHONE  SURNAME OR COMPANY NAME  HOME PHONE  HOME PHONE  SURNAME OR COMPANY NAME  HOME PHONE	MOBILE MOBILE	GIVEN NAMES  EMAIL  GIVEN NAMES  EMAIL  GIVEN NAMES  EMAIL  GIVEN NAMES	SIGNATURE % SIGNATURE %	OWNERSHIP

QRIC/2016/2853 V1.01

Refer to the Commission's privacy policy on our website.

Queensland Racing Integrity Commission ABN: 64 838 583 571 PO Box 15666 CITY EAST QLD 4002

Phone: 1300 087 021

Email: licensing@qric.qld.gov.au

Website: www.qric.qld.gov.au

Office Hours: 8:30am to 4:00pm, Mon-Fri Closed public holidays



This is to advise that the horse:

### SECTION C: NOTIFICATION OF PENDING TRANSFER OF HORSE

To avoid any repercussions due to possible delays in the Transfer of Ownership being processed, previous owner(s) should protect themselves by detaching and completing this form, then forward to the Queensland Racing Integrity Commission for processing.

Name of Horse:								
If the horse is un-named complete following Sire:	ng breeding details:	Dam:			Dat	e of Foaling:		
Was transferred by me/us on:		and it should be remov			oved fro	m my/our ownership.		
	(	(date)						
PREVIOUS OWNER(S)								
Name(s):								
Address:								
Home Phone:			Mobile					
Email:		l						
Signature/s:								
NEW MANAGING OWNER(S) CONTACT DETAILS								
Name(s):								
Address:								
Home Phone:			Mobile					
Email:		J	J.					

QRIC/2016/2853 V1.01

Refer to the Commission's privacy policy on our website.