

DEPARTMENT OF ANIMAL HUSBANDRY & DAIRYING, HARYANA DISTRICT.....

No Dated			Name of GVHName of Bank																						
			<u> </u>	lea	lth	<u>Ce</u>	rtifi	ca	te	<u> </u>															
			shud								-		-												
	fied that I have examined th	e fo	llowi	ng a	anin	nal a	nd fo	un	d f	rec	e fi	om	СО	ntag	gic	us	dise	eas	se a	ınd	god	od i	n		
	ition: -																								
A.	Name of the Beneficiary																								
	with parentage & full addr	ess																							
В.	Aadhar No.																								
C.	Mobile No.																								
D.	Particulars of Animals	Aı	nima	nimal 1.				Animal 2.								Animal 3.									
1.	Tag No.																						Ī		
2.	Species																								
3.	Breed																								
4.	Colour																								
5.	Age																								
6.	Date of Calving																			-					
7.	Sex of Calf																			-					
8.	No. of Lactation																								
9.	Approx. Milk Yield (Litres/day)	i																							
10.	Descriptions																								
	a. Horn Details																								
	b. Tail Details																								
11.	Approximate cost of the	į																							

Signature of Beneficiary

animal

POS Insurance Company Name & Signature of Veterinary Surgeon with Stamp