

**ILLINOIS DEPARTMENT OF AGRICULTURE
THOROUGHBRED BREEDERS FUND PROGRAM**

STALLION RENEWAL FORM

**INSTRUCTIONS FOR PREPARING AND SUBMITTING A THOROUGHBRED RENEWAL
STALLION APPLICATION FOR LICENSE UNDER THE HORSE RACING ACT OF 1975**

To renew the license of your stallion with the Illinois Department of Agriculture Thoroughbred Breeders Fund Program for the 2024 breeding season, it will be necessary for you to follow these instructions:

1. Complete the enclosed Application for Stallion Certification. Please review the preprinted information for its correctness, make any necessary corrections, sign the back page of the application and if you wish list your stallion's 2024 fee which is printed in the Department's "Illinois General Stallion Listing."
2. If the stallion is leased, the lessee must also sign the application. **The renewal application will not be accepted without the signature of the stallion owner and the lessee if applicable.**
3. Complete the STATEMENT OF OWNERSHIP.
4. **Return both pages by December 31, 2023. Renewal applications not submitted by that date shall be subject to monetary penalties.**

Per the Illinois Horse Racing Act of 1975. The late filing penalty for the late filing of a Renewal Application for Stallion Certification (Due before January 1st) is as follows:

1 - 30 days late	\$ 50.00
31 - 45 days late	\$150.00
more than 45 days late	\$250.00

IF THERE HAS BEEN ANY CHANGE IN THE OWNERSHIP OF THIS STALLION, YOU MUST CONTACT THIS OFFICE IMMEDIATELY.

IF OWNERSHIP WILL CHANGE FOR 2024 CONTACT THE DEPARTMENT OF AGRICULTURE. ADDITIONAL INFORMATION IS REQUIRED ALONG WITH THE APPLICATION.

RETURN THIS FORM TO:

ILLINOIS DEPARTMENT OF AGRICULTURE
BUREAU OF COUNTY FAIRS & HORSE RACING
P.O. BOX 19281 ♦ SPRINGFIELD, ILLINOIS 62794-9281
217/557-4606 ♦ Fax: 217/524-6194

Carrie.Tiskos@illinois.gov
<https://agr.illinois.gov/animals/horseracing.html>

(Street address 801 E. Sangamon Avenue, Springfield, IL 62702)



ILLINOIS THOROUGHBRED BREEDERS FUND PROGRAM
APPLICATION FOR STALLION CERTIFICATION
FOR THE ILLINOIS CONCEIVED AND FOALD PROGRAM

2024

Owner:

- RENEWAL APPLICATIONS MUST BE SUBMITTED PRIOR TO JANUARY 1 OF THE LICENSE YEAR.

NAME OF STALLION: JOCKEY CLUB #:
SIRE: DAM: YR. OF FOALING:

When Applying for Stallion Certification for the First Time, Under New Ownership or When Applying for Stallion Renewal, Complete and Submit All Items Below: (Type or Print Required Information in Ink.)

OWNER(s) AND MAILING ADDRESS:

Name:
Address:
City: State: Zip:
Telephone:

LESSEE(s) AND MAILING ADDRESS:

Name:
Address:
City: State: Zip:
Telephone:

THIS STALLION STOOD FOR SERVICE DURING 2023 AT:

Name:
Address:
City: State: Zip:
Telephone:

THIS STALLION WILL STAND FOR SERVICE DURING 2024 AT: (If the same as 2023, check box)

Name:
Address:
City: State: Zip:
Telephone:

(APPLICATION FOR STALLION CERTIFICATION)

NEW AND RENEWAL CERTIFICATION RULES: (IL Admin. Code Ch. 1, Sec. 290.155 & 160)

I Understand - In order for a stallion’s foal to be registered as Illinois conceived and foaled, any person who desires to stand the stallion for service shall, before standing or offering the stallion for service, certify the stallion with the Department.

I Understand - That the stallion will be standing for service within the State of Illinois and will not stand for service at any place outside the State of Illinois during the calendar year in which the foal is conceived.

I Understand - In order for a stallion’s foal to be registered as Illinois Conceived and Foaled, a person offering or standing the stallion for service shall maintain a complete breeding record and a report submitted to the Department by September 1 of each year, showing all mares bred, each mare’s Jockey Club registration number, first and last breeding dates and the name and address of the owner(s).

NOTIFICATION OF DESIRE TO MOVE STALLION: (IL Admin. Code Ch. 1, Sec. 290.175)

I Understand -The owners or their authorized representative must notify the Department prior to the stallion leaving the location where he is certified.

NOTIFICATION OF SALE OR TRANSFER OF OWNERSHIP OF STALLION: (IL Admin. Code Ch. 1, Sec. 290.177)

I Understand - The Department must receive notification of transfer of ownership of a certified stallion within 10 days after the sale or transfer.

I Understand - In order for new owners to have a foal registered as Illinois conceived and foaled, they must certify the stallion, before standing or offering the stallion for service, with the Department.

I Understand - The stallion may not be used for breeding purposes outside the State of Illinois during the remainder of the calendar year for which the stallion was certified as an Illinois stallion.

I UNDERSTAND THAT ANY VIOLATION OF THESE STALLION CERTIFICATION REQUIREMENTS OR DEPARTMENT OF AGRICULTURE STALLION REGULATIONS MAY RESULT IN DISQUALIFICATION FROM THE ILLINOIS THOROUGHBRED BREEDERS FUND CONCEIVED AND FOALED PROGRAM OF ANY FOALS Sired BY THIS STALLION DURING THE YEAR FOR WHICH LICENSED.

SIGNATURE OF OWNER: _____

SIGNATURE OF LESSEE: _____

(Both signatures required when the Stallion is leased)

The fee for your stallion is being sought for the “Illinois Department of Agriculture Stallion Listing.” If you wish this information to be included, please list this fee below:

Fee: _____

RETURN THIS FORM TO:

ILLINOIS DEPARTMENT OF AGRICULTURE
BUREAU OF COUNTY FAIRS & HORSE RACING
P.O. BOX 19281 ♦ SPRINGFIELD, ILLINOIS 62794-9281
217/557-4606 ♦ Fax: 217/524-6194

Carrie.Tiskos@illinois.gov ♦ <https://agr.illinois.gov/animals/horseracing.html/>

THOROUGHBRED STATEMENT OF OWNERSHIP

Name of Thoroughbred Stallion _____.

On this Affidavit, identify the owner(s) name(s), resident address(es), and the percentage of ownership of all owners of this stallion.

	OWNER(S) NAME(S) AND ADDRESS(ES):	PERCENTAGE OF OWNERSHIP
1.	Name _____ Address _____ City _____ State & Zip Code _____	_____
2.	Name _____ Address _____ City _____ State & Zip Code _____	_____
3.	Name _____ Address _____ City _____ State & Zip Code _____	_____
4.	Name _____ Address _____ City _____ State & Zip Code _____	_____
5.	Name _____ Address _____ City _____ State & Zip Code _____	_____
6.	Name _____ Address _____ City _____ State & Zip Code _____	_____
7.	Name _____ Address _____ City _____ State & Zip Code _____	_____

I hereby certify that this information is true and correct and that the above stallion meets all of the requirements for Illinois registration.

(Signature of Stallion Owner)