

# ILLINOIS DEPARTMENT OF AGRICULTURE STANDARD BRED BREEDERS FUND PROGRAM

---

## INSTRUCTIONS FOR NEW STANDARD BRED STALLIONS

or

## CHANGE IN OWNERSHIP FROM PREVIOUS YEAR

*(Updated 2021)*

1. Please Read Instructions Carefully Before Submitting Application.
2. **ANNUAL APPLICATION FOR STALLION CERTIFICATION** - Complete the enclosed Annual Application for Stallion Certification.
3. **U.S.T.A. CERTIFICATE OF REGISTRATION** – A copy of the USTA Certificate of Registration can be sent in as verification of current ownership or verification will be made via USTA’s Pathway. Ownership listed on this Application must match records listed with USTA.
4. **PROOF AND RIGHT OF OWNERSHIP** - Attach to the Application items concerning proof and right of ownership of this stallion. If purchased on contract, attach agreement signed by both parties and notarized; or, submit unsigned agreement for approval of terms prior to executing contract - and subsequent acceptance by this office. If the stallion was paid for by check, attach canceled check. If paid for in cash, you must attach notarized statement from seller detailing transaction. If stallion was purchased at an auction sale, attach purchase receipt or canceled check. If stallion was a gift, attach notarized statement of such from previous owner. If trade was involved, prepare notarized statement, giving name and description of animal(s), services and/or property involved and appraised value of same.

Attach a copy of any agreement or provide any information regarding repurchase by the previous owner, free or reduced service fees, or any concessions whatsoever to that person. If none exist, you must so state. You must submit **original documents**; they will be returned to you. Please be advised that all purchase documents must reflect a legitimate ownership in the stallion.

4. **OWNERSHIP REQUIREMENTS** – The enclosed Ownership Affidavit requesting the owner name(s), address(es), and percentage(s) of ownership, must be completed, notarized, and filed with the Application. PLEASE NOTE: **AFTER FILING THE ANNUAL APPLICATION FOR STALLION CERTIFICATION, THE OWNER MUST PROVIDE IMMEDIATE NOTIFICATION TO THE DEPARTMENT OF ANY CHANGES IN OWNERSHIP OR OWNER ADDRESS.**
5. **STALLIONS OWNED BY CORPORATIONS** - If the stallion is owned by a Corporation, copies of the Articles of Incorporation as filed with the Secretary of State's Office must be submitted with the Application.

6. **LEASED STALLIONS** - In the event that the stallion is leased, lessee must provide a copy of signed lease document to be placed in stallion's file. Terms of the lease must encompass the current year registration and include both an inception and termination date. **Both signatures**, owner's and lessee's, are required on the Application.
7. **SYNDICATED STALLIONS** - NOTE: If the stallion is, or will be, syndicated - please contact this office.
8. **MOVEMENT OF STALLIONS** – Illinois-certified stallions must stand for service in Illinois at the location indicated on this application. **IF THE LOCATION OF THE STALLION IS TO CHANGE FOR ANY REASON - OR FOR ANY PERIOD OF TIME - AFTER THE APPLICATION HAS BEEN FILED, IT IS THE OWNER'S OR LESSEE'S RESPONSIBILITY TO PROVIDE IMMEDIATE NOTIFICATION TO THE DEPARTMENT.** If the reported standing location is to change, a new Stallion Eligibility Certificate will be issued and delivered by a Department investigator. The certification of a stallion for a given year is not complete until such horse has been identified at, and the Stallion Eligibility Certificate delivered to, the reported standing location.
9. **STALLIONS IN TRAINING OR RACING** - If you plan to train or race the stallion during the year for which he is certified with the Department of Agriculture as a breeding stallion, you must notify the Department of your intent and this office must be notified of his movements within the state. Permission must be obtained if you are racing him out of the State of Illinois. Under no circumstances should he service mares at any location other than the reported standing location.
10. **TRANSPORTED FRESH SEMEN.** Semen from an Illinois-certified stallion may be transported within and outside of Illinois if the stallion: (1) is registered with the Department; (2) and stands for service in Illinois at the location indicated on the application. An inseminated mare must be in Illinois at least 30 days prior to foaling or remain in Illinois at least 30 days at the time of foaling for the resultant foal to be eligible for registration as an Illinois conceived and foaled horse. Artificial insemination must be indicated on the Record of Mares Bred report due September 1 of each year.
11. **EMBRYO TRANSFER.** Please review the requirements for participating in the embryo transfer program. A copy of the Rules pertaining to “Embryo Transfers” (Section 290.85 - Qualifications for Illinois Conceived and Foaled Standardbred Horses) is enclosed.
12. **Return the completed Application and other pertinent information prior to breeding any mares to:**

**RETURN 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.tisckos@illinois.gov](mailto:carrie.tisckos@illinois.gov)

[www2.illinois.gov/sites/agr/Animals/HorseRacing/Pages/default.aspx](http://www2.illinois.gov/sites/agr/Animals/HorseRacing/Pages/default.aspx)



HORSE RACING PROGRAMS • IL DEPT. OF AGRICULTURE • STATE FAIRGROUNDS • P.O. BOX 19281 • SPRINGFIELD, IL 62794-9281 • GENERAL INFORMATION (217) 782-4231 • STANDARD BRED (217) 557-4606 • FAX (217) 524-6194 • TDD (866) 287-2999

**ILLINOIS STANDARD BRED BREEDERS FUND PROGRAM  
ANNUAL APPLICATION FOR STALLION CERTIFICATION**

Owner Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State \_\_\_\_\_  
Zip \_\_\_\_\_ Phone # \_\_\_\_\_

2023

**APPLICATIONS FOR NEW STALLIONS MUST BE SUBMITTED PRIOR TO SERVICING MARES.**

**NAME OF STALLION:** \_\_\_\_\_ **TATTOO NO:** \_\_\_\_\_.

**SIRE:** \_\_\_\_\_ **DAM:** \_\_\_\_\_ **YR. OF FOALING:** \_\_\_\_\_.

The following is being sought for the "Illinois Department of Agriculture Stallion Listing". If you wish this information to be included, please indicate: Service Fee \_\_\_\_\_ Check here if Transported Fresh Semen is an option: \_\_\_\_\_  
Circle one of the following if the horse will be racing during the year Yes / No  
Date stallion will be at standing Location \_\_\_\_\_

**→ FIRST TIME CERTIFICATION (OR NEW OWNERSHIP), PLEASE COMPLETE THE FOLLOWING SECTION (1-4):**

- PLEASE INDICATE PARTY FROM WHOM STALLION WAS ACQUIRED:  
NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_
- PURCHASE DATE: \_\_\_\_\_
- ATTACH TO THIS APPLICATION ITEMS CONCERNING PROOF AND RIGHT OF OWNERSHIP. IF BEING PURCHASED ON CONTRACT, ATTACH SIGNED AGREEMENT. IF PAID FOR BY CHECK, ATTACH CANCELED CHECK. IF PAID IN CASH, ATTACH NOTARIZED AFFIDAVIT FROM SELLER. IF STALLION WAS PURCHASED AT AUCTION SALE ATTACH PURCHASE RECEIPT. IF STALLION WAS A GIFT, ATTACH NOTARIZED STATEMENT FROM PREVIOUS OWNER. IF TRADE WAS INVOLVED, PREPARE NOTARIZED STATEMENT GIVING NAME AND DESCRIPTION OF ANIMAL(S), SERVICES, AND/OR PROPERTY INVOLVED AND APPRAISED VALUE OF SAME.  
  
ATTACH COPY OF, OR GIVE ANY INFORMATION AS TO ANY AGREEMENT OR UNDERSTANDING REGARDING REPURCHASE BY THE PREVIOUS OWNER, FREE OR REDUCED SERVICE FEES, OR ANY CONCESSIONS WHATSOEVER TO THAT PERSON. ONLY ORIGINAL DOCUMENTS WILL BE ACCEPTED AND WILL BE RETURNED BY CERTIFIED MAIL.
- OWNERSHIP LISTED ON THIS APPLICATION MUST MATCH RECORDS LISTED WITH USTA. VERIFICATION WILL BE MADE VIA PATHWAY.

**→ RENEWALS -AS WELL AS STALLIONS APPLYING FOR FIRST TIME CERTIFICATION - COMPLETE THE FOLLOWING:**

- COMPLETE THE ENCLOSED OWNERSHIP AFFIDAVIT STATING THE OWNER(S), ADDRESSES, , AND PERCENTAGE OF OWNERSHIP. AFFIDAVIT **MUST BE NOTARIZED AND RETURNED WITH APPLICATION.** (WHEN APPLYING FOR RENEWAL, AFFIDAVIT NEED NOT BE RETURNED IF ALL OWNERSHIP INFORMATION, INCLUDING OWNER ADDRESS, IS SAME AS PREVIOUS YEAR.)

**(PLEASE COMPLETE BOTH SIDES OF THIS APPLICATION.)**

6. THIS STALLION STOOD FOR SERVICE DURING 2022 AT:

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_

OR, STALLION DID NOT STAND FOR SERVICE IN 2022 ( )

7. THIS STALLION WILL STAND FOR SERVICE DURING 2023 AT:

IF SAME AS #6 CHECK HERE ( )

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_

**PLEASE NOTE: THE DEPARTMENT MUST BE NOTIFIED IMMEDIATELY OF ANY CHANGE IN THE LOCATION OF THIS STALLION. POLICY TO BE EFFECTIVE THROUGHOUT ENTIRE YEAR OF CERTIFICATION.**

8. OWNER AND MAILING ADDRESS (ATTACH ADDITIONAL PAGES IF NECESSARY. NOTE: ALL INDIVIDUAL OWNERS MUST BE INDICATED HERE UNLESS OWNERSHIP IS VESTED IN CORPORATION OR SYNDICATE.):

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_

9. LESSEE AND MAILING ADDRESS (NOTE: CURRENT YEAR FORMAL LEASE DOCUMENT MUST BE ON FILE WITH THE DEPARTMENT OF AGRICULTURE):

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_

**PLEASE READ THE FOLLOWING SECTION CAREFULLY. YOUR SIGNATURE SIGNIFIES THAT YOU HAVE READ AND WILL COMPLY WITH THE REQUIREMENTS FOR CERTIFYING A STALLION WITH THE ILLINOIS STANDARDBRED BREEDERS FUND PROGRAM.**

- ***I understand*** that the Department of Agriculture must be notified immediately of any change in the location of this stallion.
- ***I understand*** that immediate notification must be given to the Department of Agriculture if this stallion leaves the state in the year for which certified.
- ***I understand*** that this stallion must not stand for service outside of the State of Illinois during the year for which certified.
- ***I understand*** that the Department of Agriculture must be notified immediately of any change in ownership or owner address of this stallion.
- ***I understand*** that if this stallion is leased, a copy of that lease must be filed with, and approved by, the Department of Agriculture.
- ***I understand*** that records must be kept and a report filed on Department of Agriculture forms September 1 of each year listing all mares bred, first and last breeding dates, transported fresh semen is indicated and complete name and address of the mare owners. I further understand that a report must be filed even if the stallion was not used for breeding purposes during the year for which certified.
- ***I understand*** that any violation of these stallion certification requirements or Department of Agriculture stallion regulations may result in disqualification from the Illinois Standardbred Breeders Fund Program of any foals sired by this stallion during the year for which certified.

**SIGNATURES (BOTH SIGNATURES REQUIRED WHEN THE STALLION IS LEASED):**

OWNER: \_\_\_\_\_ LESSEE: \_\_\_\_\_

THIS APPLICATION MUST BE SUBMITTED TO:

HORSE RACING PROGRAMS, IL DEPT. OF AGRICULTURE  
P.O. BOX 19281, SPRINGFIELD, IL 62794-9281



**STANDARD BRED STATEMENT OF OWNERSHIP**

Name of Standardbred Stallion \_\_\_\_\_.

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

OWNERS NAMES & COMPLETE ADDRESS

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	

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)

Subscribed and sworn to, before me this \_\_\_\_\_ day of \_\_\_\_\_, 20

(Seal)

\_\_\_\_\_  
(Notary Public)