



# Authorization of Agent

**MUST BE NOTARIZED**

Please complete entire form and return to:

Professional Horse Services, LLC  
P O Box 404 - Round Hill, VA 20142  
855.272.3905

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

I hereby appoint \_\_\_\_\_ to be my authorized agent in all matters  
(Name of Agent)  
pertaining to the sale of horses to be sold at the auction conducted by Professional Horse Services, LLC on  
\_\_\_\_\_.

I agree to be bound in all respects by all actions of my agent on my behalf, including, but not limited to: execution of documents pertaining to such sale, granting of security interests; receipt and disbursement of funds; waiver of rights under consignor's contract, conditions of sale or law; acceptance of goods; and right to make representations regarding any animal.

I agree that all correspondence shall be sent to the AGENT.

Professional Horse Services, LLC's policy is to make sale proceeds check payable to the owner of record printed on the registration papers, and mail the check to the OWNER. If you would like the proceeds handled differently you MUST initial and explain (if applicable) choice of Payment Instruction.

OWNER must initial payment procedure selected, if different from PHS, LLC's policy.

\_\_\_\_\_ I authorize Professional Horse Services, LLC to make sale proceeds check payable to me, the OWNER, and mailed to the AGENT.

\_\_\_\_\_ I authorize Professional Horse Services, LLC to make sale proceeds check payable to the AGENT and mailed to the AGENT.

\_\_\_\_\_ I authorize Professional Horse Services, LLC to make sale proceeds check payable in the following way:  
\_\_\_\_\_.

I agree that this authorization shall be revocable only in writing that such revocation shall become effective only when acknowledged in writing by Professional Horse Services, LLC.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Signature: \_\_\_\_\_