

APPLICATION FOR PASTURE INSURANCE

This is not a binder. No application will be considered if not fully completed and signed by the Insured

REQUESTED EFFECTIVE DATE: _____

Producer's Name: _____	Applicant Name: _____
Agency Name: _____	FEIN or SSN: _____
Mail Address: _____	Mail Address: _____
City, State, Zip: _____	City, State, Zip: _____
Phone: _____	Phone: _____
Fax: _____	Fax: _____
Email Address: _____	Email Address: _____

Coverage Requested:

Specified Perils	Livestock Born	Grazing & Posinioning	Mortgaged & Stolen Liability
Smothering & Hypothermia Exclusion	Contaminated Feed Exclusion	Thft Exclusion	
Special Valuation (Purebred, Genomic, Organic, Grass Fed/Free Range, Age & Source)			

Limits Requested (all per occurrence):

\$ _____ Policy Maximum

\$ _____ Contaminated Feed or Water

\$ _____ Incidental Locations (\$10,000 standard)

\$ _____ Additional Acquired (\$250,000 standard)

\$ _____ Protection/Mitigation (\$10,000 standard)

\$ _____ Carcass Disposal (\$10,000 standard)

Deductible Requested(500 minimum): \$ _____

Payment Plan: _____

Reporting Policy: Yes No

Has any company canceled or refused to write coverage for your livestock? Yes No If Yes, please explain

Please explain if applicant owns, operates or has financial interest in any other livestock operation.

Name & Address of Loss Payee (if applicable): _____

Name & Address of Licensed Veterinarian to be used on claims _____

Does anyone reside on premises? Yes No

Are Employees on duty and present 24 hours per day? Yes No

If you answered no to both questions above, how often will livestock be checked? _____

List any combustible materials stored on premises (gas, propane, diesel, hay, etc.): _____

Provide the minimum distance of combustible materials are stored from any buildings/pens containing livestock:

Will entrances gates be locked when no one is present? Yes No

List all sources of water: _____

How often is a water quality analysis performed? _____

List all sources of feed that are purchased: _____

List all sources of feed mixed by applicant, including supplements: _____

If feed is mixed by applicant, how often is a feed quality analysis performed? _____

If silage is stored on premises, specify storage method: _____

Are there any chemicals, noxious materials or pesticides stored or applied within 100 meters of any feed or water source?

Yes No If Yes, explain: _____

Has applicant ever suspected any sickness or death of livestock due to contaminated feed or water? Yes No

If Yes, explain _____

Is pasture owned, leased, or public domain? _____

Are there any rivers, streams, ponds, dams, or dry washes on property? _____

Are there any barns, shelters, or windbreaks on property? Yes No If Yes, how many? _____

Has applicant ever suspected any sickness of livestock due to poisoning from grazing? Yes No

If Yes, explain _____

Installment Payment Plans?	YES	NO (Available for premiums over \$500)
	ANNUAL	SEMI-ANNUAL QUARTERLY

How did you hear about us? _____

Please list all livestock losses in the past 5 years, whether covered by insurance or not. (excluding any normal mortality)

Date	Cause	Amount of Loss
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Fraud Prevention - General Warning

Any person who knowingly presents a false or fraudulent claim for payment or loss or benefit or knowingly presents false information in an application for insurance may be guilty of a crime and may be subject to fines and confinement in prison.

STATE SPECIFIC PROVISIONS

- Arkansas** Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.
- Colorado** It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado division of insurance within the department of regulatory agencies.
- District Columbia** WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any of other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.
- Florida** Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.
- Hawaii** For your protection, Hawaii law requires you to be informed that presenting a fraudulent claim for payment of a loss or benefit is a crime punishable by fines or imprisonment, or both.
- Kansas** Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act.
- Kentucky** Any person who knowingly and with the intent to defraud any Insurance Company or other person files an application for insurance containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime.
- Louisiana** Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit, or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.
- Maine** It is a crime to knowingly provide false, incomplete or misleading information to an Insurance Company for the purpose of defrauding the Company. Penalties include imprisonment, fines and denial of insurance benefits.
- Maryland** Any person who knowingly or willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly or willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.
- New Jersey** Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.
- New Mexico** Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit, or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.
- New York** Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

Ohio Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Oklahoma WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

Oregon Any person who, knowingly and with intent to defraud or facilitate a fraud against any insurance company or other person, submits an application, or files a claim for insurance containing any false, deceptive, or misleading material information may be guilty of insurance fraud. In order for us to deny a claim on the basis of misstatements, misrepresentations, omissions or concealments on your part, we must show that: A. The misinformation is material to the content of the policy; B. We relied upon misinformation; and C. The information was either 1. Material to the risk assumed by us; or 2. Provided fraudulently. For remedies other than the denial of a claim, misstatements, misrepresentations, omissions or concealments on your part must either be fraudulent or material to our interests. With regard to fire insurance, in order to trigger the right to remedy, material misrepresentations must be willful or intentional. Misstatements, misrepresentations, omissions or concealments on your part are not fraudulent unless they are made with the intent to knowingly defraud

Pennsylvania Any person who knowingly and with the intent to defraud any Insurance Company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

Puerto Rico Any person who knowingly and with the intent to defraud, presents false information in an insurance request form, or who presents, helps, or has presented a fraudulent claim for the payment of a loss or other benefit, or presents more than one claim for the same damage or loss, will incur a felony, and upon conviction will be penalized for each violation with a fine of no less than five thousand dollars (\$5,000) nor more than ten thousand dollars (\$10,000); or imprisonment for a fixed term of three (3) years, or both penalties. If aggravated circumstances prevail, the fixed established imprisonment may be increased to a maximum of five (5) years; if attenuating circumstances prevail, it may be reduced to a minimum of two (2) years.

Rhode Island Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

Tennessee It is a crime to knowingly provide false, incomplete or misleading information to an Insurance Company for the purpose of defrauding the Company. Penalties include imprisonment, fines and denial of insurance benefits.

Virginia It is a crime to knowingly provide false, incomplete or misleading information to an Insurance Company for the purpose of defrauding the Company. Penalties include imprisonment, fines and denial of insurance benefits.

Washington It is a crime to knowingly provide false, incomplete or misleading information to an Insurance Company for the purpose of defrauding the Company. Penalties include imprisonment, fines and denial of insurance benefits.

West Virginia Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

I understand that it is required under the policy to do the following in the event of loss, and that not doing so may jeopardize coverage and result in denial of any claim made.

- Give immediate notice by telephone of any loss to insured livestock
- Not remove dead livestock until authorized by us, unless legally required to do so
- Preserve any physical evidence relating to the cause of loss to insured livestock to assist with our claim investigation
- Have a licensed veterinarian perform an autopsy on 10% of the livestock that have died in a loss at your expense, verifying the cause of death

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS THE PERSON TO CRIMINAL AND [NY: SUBSTANTIAL] CIVIL PENALTIES. (Not applicable in CO, HI, NE, OH, OK, OR, or VT; in DC, LA, ME, TN, and VA, insurance benefits may also be denied. See below for additional fraud warnings)

APPLICANTS SIGNATURE	DATE	PRODUCERS SIGNATURE	DATE