

**COLONY INSURANCE COMPANY – COLONY SPECIALTY INSURANCE COMPANY  
COLONY NATIONAL INSURANCE COMPANY****CONTRACT DIVISION - FARM and RANCH APPLICATION**

Edition date 09.01.14

Check all applicable checkboxes below

|                          |       |
|--------------------------|-------|
| General Agent:           | Date: |
| Insured:                 |       |
| Insured Mailing Address: |       |
| Insureds Phone Number:   |       |
| Insured's Web Address:   |       |

**BUSINESS TYPE** Individual     Joint Vent     LLC     Religious     Partnership     Other: \_\_\_\_\_**QUOTE** New Business     Renewal    Expiring Policy Number: \_\_\_\_\_**YEARS IN BUSINESS / EXPERIENCE**

\_\_\_\_\_ Years in business under the 'Named Insured' indicated on this application

\_\_\_\_\_ Years experience in the operations indicated within this application    Attach resume(s) if available

 Applicant has had their policy cancelled or non-renewed in the past three years**LOSS HISTORY** Three years of loss history information provided attached to this application**OPERATIONS / EXPOSURES****Describe your farm and ranch operations (business activities are covered later in the application):** Homeowners insurance will be placed with another carrier Insured serves on outside boards

Name(s) of board(s): \_\_\_\_\_

 Subsidiary companies exist but are insured elsewhere

Names of Subsidiaries: \_\_\_\_\_

 Retail Agent has personally inspected the premises

**FARM and RANCH APPLICATION - LOCATION SCHEDULE**

**LOCATION INFORMATION** (Mandatory for both farm liability and farm property)

Seasonal use. If "yes" advise which location(s): \_\_\_\_\_

Vacant If "yes" advise which location(s): \_\_\_\_\_

Vacant over 2 yrs If "yes" advise which location(s): \_\_\_\_\_

Seasonal/Vacant Property(s) checked:  Monthly  Bi-Weekly  Weekly

|            |             |                             |
|------------|-------------|-----------------------------|
| <b>Loc</b> | <b>Bldg</b> | Address including Zip Code: |
| <b>Loc</b> | <b>Bldg</b> | Address including Zip Code: |
| <b>Loc</b> | <b>Bldg</b> | Address including Zip Code: |
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| <b>Loc</b> | <b>Bldg</b> | Address including Zip Code: |
| <b>Loc</b> | <b>Bldg</b> | Address including Zip Code: |

**FARM and RANCH APPLICATION - LIABILITY**

| COVERAGE                                                                                                                                                                        | LIMITS                                                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|
| <b>GENERAL AGGREGATE LIMIT</b><br><ul style="list-style-type: none"> <li>Indicate a limit between \$300,000 to \$2,000,000</li> </ul>                                           | \$                                                    |
| <b>EACH OCCURRENCE LIMIT</b><br><ul style="list-style-type: none"> <li>Indicate a limit between \$250,000 to \$1,000,000</li> </ul>                                             | \$                                                    |
| <b>PERSONAL AND ADVERTISING LIABILITY – ANY ONE PERSON OR ORGANIZATION LIMIT</b>                                                                                                | Same as “Each Occurrence” Limit as is indicated above |
| <b>FIRE DAMAGE LIMIT – ANY ONE FIRE (RENTED TO INSURED)</b><br><ul style="list-style-type: none"> <li>Limit cannot be deleted, increased or decreased</li> </ul>                | \$ 50,000                                             |
| <b>MEDICAL PAYMENTS – ANY ONE PERSON LIMIT (EXCEPT RESIDENT EMPLOYEES)</b><br><ul style="list-style-type: none"> <li>Limit cannot be deleted, increased or decreased</li> </ul> | \$ 1,000                                              |

**DEDUCTIBLE – LIABILITY – (per occurrence)**  
 \$500     \$1,000     \$2,500     \$5,000     \$10,000

**COVERAGE OPTIONS:** (Check only the options you want applied to your quote)

**Controlled/Prescribed Burns and Chemical Drift** (Third Party Liability) provided with a \$25,000 sublimit at no additional premium charge. Select one of the following if you need higher limits:

\$50,000 sublimit for \$500                       \$100,000 sublimit for \$1,000

Check if applicable:

Insured conducts controlled burns on their property. If “yes” what is the average number of controlled/prescribed burns per year: \_\_\_\_\_

All controlled burn permits and fire department notifications are secured where required

A Wildfire mitigation / Vegetation control is ongoing within 150 ft. of all insured structures

**Identity Recovery** (i.e. Identity Theft) - \$19

**Liquor Liability:**

- Available with vineyard/winery risks only

- Not available in: AK, AL, CT, DC, DE, HI, IA, IL, IN, MA, MD, ME, MI, MN, MO, NH, NJ, NY, OH, PA, RI, VA, VT, WV

Employees serving alcohol have liquor training such as TIPS or TOPS

Annual receipts for liquor served on or off vineyard premises: \$ \_\_\_\_\_

**Products / Completed Operations to be EXCLUDED:**

**ASSAULT AND BATTERY:**

- Not sub-limited

**SUBCONTRACTED LABOR:**

- Injury (BI, PD, and AI/PI) that occurs to any uninsured temporary workers, volunteer workers, casual workers, independent contractors, or farm employee of an independent contractor is excluded.
- Injury caused by uninsured subcontracted labor to third parties is not excluded.

**NOT AVAILABLE:**

- Aggregate Per Location” or „Aggregate Per Project“
- Higher Limit Farm Liability (seek Excess/Umbrella instead)
- Hired and Non-Owned Auto
- Host Liquor (buyback not available)
- Personal and Advertising Injury coverage for risks with „organic“ farming exposures
- Professional Liability

**FARM and RANCH APPLICATION - LIABILITY**

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|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| <p><b>OWNED OR LEASED ACREAGE – RISKS UP TO 150 ACRES – FR01518</b><br/> <b>OWNED OR LEASED ACREAGE – RISKS ABOVE 150 ACRES – FR1618</b></p> <ul style="list-style-type: none"> <li>• Required rating step for all Farm/Ranch risks</li> <li>• All owned, leased and/or vacant land regardless of use or non-use</li> <li>• 1 sq. mile = 640 acres</li> <li>• Code FR01518 applies to policies with 150 acres or less</li> <li>• Code FR01618 applies to policies with more than 150 acres</li> <li>• <b>Prohibited:</b> <ul style="list-style-type: none"> <li>• Dams or levees with the exception of low height retention ponds used for watering animals; Mines, Open pits, Quarries and/or Strip mining</li> </ul> </li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <p><b>Number of Acres:</b></p>        |
| <p><b>AQUA-CULTURE - FR56760</b> (Check only those that apply)</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Certified by the Aqua-Culture Certification Council (ACC)</li> <li><input type="checkbox"/> Chemical and drug handling is always done to mfg's specifications</li> <li><input type="checkbox"/> Licensing: All applicable Federal, State and/or Local licensing permits have been obtained and are on file</li> <li><input type="checkbox"/> Recalls: Production/sales documentation in place to assist in the event of a product recall</li> <li><input type="checkbox"/> Testing of product is in place and meets all applicable USDA standards</li> <li><input type="checkbox"/> Waste/sediment handling is per all applicable environmental standards</li> <li>• <b>Prohibited:</b> <ul style="list-style-type: none"> <li>• Ocean marine exposures</li> </ul> </li> </ul>                                                                                                                                                                                                                                                                                                                                                                             | <p><b>Annual Receipts:</b><br/>\$</p> |
| <p><b>BEEES, CROPS, NURSERY STOCK, NUTS, PLANTS, SOD, TREES – FR01901</b></p> <ul style="list-style-type: none"> <li>• Acreage used for beekeeping, berries, crops, field or forage crops, flowers, fruits, grain, herbs, honey, legumes, mushrooms, nursery stock, nuts, plants, spices, sod, straw, trees, vegetables, vineyards</li> <li>• Do not include acreage devoted solely to the raising of animals</li> <li>• <b>Prohibited:</b> <ul style="list-style-type: none"> <li>• Rooftop farming and Tobacco Farming</li> </ul> </li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <p><b>Number of Acres:</b></p>        |
| <p><b>ANIMALS AND LIVESTOCK – FR01391</b></p> <ul style="list-style-type: none"> <li>• <b>Number of head</b> of cattle, donkeys, goats, horses, mules, sheep, swine or exotics (i.e. alpaca, bison, deer, llamas, yaks)</li> <li>• Do NOT include birds/poultry, or animals being raised for their fur</li> <li>• Check only those that apply: <ul style="list-style-type: none"> <li><input type="checkbox"/> Fences inspected and repaired on a regular basis</li> <li><input type="checkbox"/> Fence heights are appropriate for animal type(s)</li> </ul> </li> <li>• Prohibited animal exposures: <ul style="list-style-type: none"> <li>• German Shepherds, Huskies, Mastiffs, Pit Bulls, Rottweilers</li> <li>• Exotic animals that are inherently aggressive or vicious (i.e. alligators, bears, venomous snakes, wild cats, wolves or similar</li> <li>• Racing type to include breeding, boarding, training or ownership</li> <li>• Saddle animals if provided for use by third parties</li> <li>• Stabling of animals prohibited, unless no fee/receipts are charged</li> <li>• Training of any type of animal that includes a third party as part of the exposure. Example would be riding lessons, pet training with owner.</li> <li>• Zoos, Petting Zoos</li> </ul> </li> </ul> | <p><b>Number of Head</b></p>          |
| <p><b>POULTRY AND BIRDS – FR07230</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <p><b>Annual Receipts:</b><br/>\$</p> |

**FARM and RANCH APPLICATION - LIABILITY**

| <b>BUSINESS ACTIVITIES AND BUSINESS PURSUITS – EXCLUDING CONSTRUCTION, REMODELING OR RENOVATION – FR01235 (Check applicable items only)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                  | <b>Total Receipts for Business Activities:</b> |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> Aircraft or Aircraft Related Facilities are prohibited<br><input type="checkbox"/> Amusement/Recreation/Sports/Vacation - Submit if not on prohibit list below. <ul style="list-style-type: none"> <li>• Amusement rides including arcade rides, bounces, bounce houses, and inflatables are prohibited</li> </ul> <input type="checkbox"/> Archery ranges<br><input type="checkbox"/> Athletics or sports activities (describe): _____<br><input type="checkbox"/> Beaches, Lakes, Ponds (Mandatory: If a fee is charged for property access then third party swimming must be prohibited and area posted 'No Swimming'<br><input type="checkbox"/> Boats and watercraft (Max length 26 ft – motors not exceeding 50 HP)<br><input type="checkbox"/> Cabin – Vacation Rentals<br><input type="checkbox"/> Campgrounds<br><input type="checkbox"/> Carriage rides are prohibited<br><input type="checkbox"/> Caving and spelunking by third parties is prohibited<br><input type="checkbox"/> Corn maze / pumpkin patch<br><input type="checkbox"/> Dude ranches - Guest participation in actual farm/ranch activities is prohibited<br><input type="checkbox"/> Fishing (including tournaments)<br><input type="checkbox"/> Fishing Piers (Oceanside exposures prohibited)<br><input type="checkbox"/> Guide and Outfitting<br><input type="checkbox"/> Hang gliding by third parties is prohibited<br><input type="checkbox"/> Haunted Houses are prohibited<br><input type="checkbox"/> Haunted Forests are prohibited<br><input type="checkbox"/> Hay rides – Public road exposure and speeds above 5 mph are prohibited<br><input type="checkbox"/> Hot air ballooning by third parties is prohibited<br><input type="checkbox"/> Hot Springs are prohibited<br><input type="checkbox"/> Hunting by third parties on Insured's premises<br><input type="checkbox"/> Ice skating by third parties is prohibited if a fee is charged<br><input type="checkbox"/> Paintball activities involving third parties prohibited<br><input type="checkbox"/> Parachuting is prohibited<br><input type="checkbox"/> Picnic grounds/facilities used by third parties<br><input type="checkbox"/> Playground offered for use by third parties<br><input type="checkbox"/> Racing or Competitions with 'motorized equipment' or motorized vehicles including but not limited to ATV's, Autos, Dirt bikes, Motorcycles, Snowmobiles, tractors (including Tractor Pulls), Trucks or misc. types of motorized farm machinery or equipment are prohibited<br><input type="checkbox"/> Rafting by third parties – Class III, IV or V rapids are prohibited<br><input type="checkbox"/> Rifle, Pistol or Skeet Ranges<br><input type="checkbox"/> Rock climbing by third parties<br><input type="checkbox"/> Rodeo on Insured's premises<br><input type="checkbox"/> Sleigh rides are prohibited<br><input type="checkbox"/> Special Events involving third parties<br><input type="checkbox"/> Tours of premises offered to third parties<br><input type="checkbox"/> Trails for use by third parties (hiking trails acceptable)<br><input type="checkbox"/> <ul style="list-style-type: none"> <li>• Trails for ATV's, Dirt bikes, Horses, Motorcycles, Skiing or Snowmobile trail use by third parties are all prohibited</li> </ul> <input type="checkbox"/> Trampolines are prohibited<br><input type="checkbox"/> Water Skiing by unrelated third parties prohibited<br><input type="checkbox"/> Zip Lines exposures prohibited | <p>\$ _____</p> <p>-----</p> <p><b>Exclude project costs related to Construction, Remodel, Renovation</b></p> <p><b>Exclude Income derived from leases related to oil and gas wells and/or wind turbines</b></p> |                                                |

**FARM and RANCH APPLICATION - LIABILITY**

| <b>BUSINESS ACTIVITIES AND BUSINESS PURSUITS - EXCLUDING CONSTRUCTION, REMODELING OR RENOVATION - FR01235 (continued)</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/>                                                                                                  | <b>Artificial Insemination</b> for third parties <ul style="list-style-type: none"> <li>• Mandatory: Semen sales acceptable only if they can not be traced to a specific animal, or related to a prize animal</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| <input type="checkbox"/>                                                                                                  | <b>Auctioneering</b> for third parties                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/>                                                                                                  | <b>Bartering</b> of goods or services                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/>                                                                                                  | <b>Breeding</b> of cats, dogs, rabbits                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/>                                                                                                  | <b>Christmas Tree Farm</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| <input type="checkbox"/>                                                                                                  | <b>Custom Farming/Ranching</b> (i.e. Subcontracting to third parties): <ul style="list-style-type: none"> <li><input type="checkbox"/> Farm machinery operations for third parties</li> <li><input type="checkbox"/> Orchard or Vineyard Operations Performed for third parties</li> <li><input type="checkbox"/> Other – Describe:               <ul style="list-style-type: none"> <li>• Custom Farming including bale chasing, crop dusting, herbicide and pesticide work and silage pile work are prohibited</li> <li>• Generally if 100% custom farming risks are prohibited, exceptions are ‘Farm Machinery Operations by Contractors’ and/or ‘Fruit or Vegetable Harvesting Contractors’</li> </ul> </li> </ul> |
| <input type="checkbox"/>                                                                                                  | <b>Daycare - Foster Care - Misc. Education</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <input type="checkbox"/>                                                                                                  | <b>Drying Facilities</b> (gas or electric) for grain or similar are prohibited                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <input type="checkbox"/>                                                                                                  | <b>Dumps and Landfills</b> are prohibited                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <input type="checkbox"/>                                                                                                  | <b>Farmers Markets -Concession Stands – Restaurants – Retail</b> conducted off-premises                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <input type="checkbox"/>                                                                                                  | <b>Feed, Grain, Hay Dealers</b> , but only if sales off-premises                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <input type="checkbox"/>                                                                                                  | <b>Feedlots - Containment Operations - Yard Confinement</b> , but only if for third parties. <ul style="list-style-type: none"> <li>• Mandatory: No more than 300 head in confined areas with no natural grazing east of the Mississippi River (excluding IL and WI). No more than 500 head in all other states.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                            |
| <input type="checkbox"/>                                                                                                  | <b>Grain Elevators and Grain Storage Bins</b> <ul style="list-style-type: none"> <li>• If active dust controls systems are in use then the exposure is prohibited</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <input type="checkbox"/>                                                                                                  | <b>Grain Milling</b> for third parties                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/>                                                                                                  | <b>Grain Storage</b> for third parties                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/>                                                                                                  | <b>Hazardous materials application, handling and/or storage</b> for third parties is prohibited                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <input type="checkbox"/>                                                                                                  | <b>Leasing to Third Parties – Buildings</b> (including habitational) <ul style="list-style-type: none"> <li>• Mandatory: Tenant’s operations and exposures must be of a type normally acceptable in Contract binding</li> <li>• Mandatory: Stoves (coal, pellet or wood) must be installed to code or to manufacturer’s specifications (when no local building codes apply). Space heaters &amp; portable kerosene heaters used as primary heat sources prohibited.</li> </ul>                                                                                                                                                                                                                                         |
| <input type="checkbox"/>                                                                                                  | <b>Leasing to Third Parties – Land</b> <ul style="list-style-type: none"> <li>• Mandatory: Tenant’s operations and exposures must be of a type normally acceptable in Contract binding</li> <li>• Describe tenant’s operations (if any):</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <input type="checkbox"/>                                                                                                  | <b>Leasing to Third Parties (oil and gas wells and/or wind turbines only)</b> <ul style="list-style-type: none"> <li>• Leasing related to energy related facilities such as ethanol facilities or mining are prohibited</li> <li>• Mandatory: Must be owned, maintained and operated by third parties</li> <li>• Owner/operators must provide certificates confirming general liability coverage with at least \$1MM limits and confirm Additional Insured status for our insured.</li> <li>• <b>Do NOT include receipts for these exposures as we do not cover this exposure</b></li> </ul>                                                                                                                           |

**FARM and RANCH APPLICATION - LIABILITY**

| <b>BUSINESS ACTIVITIES AND BUSINESS PURSUITS EXCLUDING CONSTRUCTION, REMODELING OR RENOVATION – FR01235 (continued)</b> |                                                                                                                                                                                          |
|-------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/>                                                                                                | <b>Livestock Dealers/Commission Merchant</b> for third parties                                                                                                                           |
| <input type="checkbox"/>                                                                                                | <b>Livestock Sales</b> done for third parties                                                                                                                                            |
| <input type="checkbox"/>                                                                                                | <b>Manure and Methane Digesters</b> are prohibited                                                                                                                                       |
| <input type="checkbox"/>                                                                                                | <b>Meat Processing</b> done for Insured or for third parties                                                                                                                             |
| <input type="checkbox"/>                                                                                                | <b>Packing House</b> Operations for Third parties                                                                                                                                        |
| <input type="checkbox"/>                                                                                                | <b>Pick-Your-Own</b> Fruits, Nuts, Vegetables                                                                                                                                            |
| <input type="checkbox"/>                                                                                                | <b>Produce Handling or Packing</b> for third parties                                                                                                                                     |
| <input type="checkbox"/>                                                                                                | <b>Rental or Leasing of machinery</b> or equipment to third parties<br>• Mandatory: Fees/receipts must not be collected                                                                  |
| <input type="checkbox"/>                                                                                                | <b>Repairs, Build or Design of machinery, equipment and/or vehicles</b><br>• Mandatory: Fees/receipts must not be collected                                                              |
| <input type="checkbox"/>                                                                                                | <b>Retail Stores – Not Food – On or Off the Insured’s Premises</b><br>• Mandatory: There must not be any sales of non-pasteurized dairy or juice products directly to the final consumer |
| <input type="checkbox"/>                                                                                                | <b>Smoking of Meat, Fish or Seafood</b> for Insured or third parties<br>• Mandatory: Smoking must not be conducted within 50 ft. of any insured structure                                |
| <input type="checkbox"/>                                                                                                | <b>Snow Removal</b> for third parties                                                                                                                                                    |
| <input type="checkbox"/>                                                                                                | <b>Special Events</b> for third parties - Describe:                                                                                                                                      |
| <input type="checkbox"/>                                                                                                | <b>Stabling</b> of Animals for third parties<br>• Mandatory: Fee/receipts must not be collected                                                                                          |
| <input type="checkbox"/>                                                                                                | <b>Stockyards</b> that have animals owned by third parties                                                                                                                               |
| <input type="checkbox"/>                                                                                                | <b>Towers</b> owned and/or maintained by insured<br>• Mandatory: Must not exceed height of 72 feet                                                                                       |
| <input type="checkbox"/>                                                                                                | <b>Wine Manufacturing, Processing, or Retail Sales</b>                                                                                                                                   |
| <input type="checkbox"/>                                                                                                | <b>Other</b> (Describe):                                                                                                                                                                 |

| <b>BUSINESS ACTIVITIES AND BUSINESS PURSUITS - CONSTRUCTION, REMODELING AND UPDATING EXPOSURES ONLY – FR01236</b>                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>Total Combined Cost of Project(s)</b> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|
| <input type="checkbox"/> Insured has Construction/Remodeling/Repair/Updating exposures for owned structures on the Insured’s premises <ul style="list-style-type: none"> <li><input type="checkbox"/> Third party contractors are used who provide certificates verifying liability limits At or equal to the insured’s, as well as workers compensation</li> <li><input type="checkbox"/> Insured is acting as their own general contractor</li> <li><input type="checkbox"/> Insured is doing some or all of the construction related work</li> </ul> | \$                                       |

**FARM and RANCH APPLICATION - LIABILITY**

| <b>MISCELLANEOUS LIABILITY</b>                                                                                                                                                                                                                                                                                                                                                                     |                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|
| <b>ATV's or Snowmobiles:</b><br><ul style="list-style-type: none"> <li><b>Prohibited:</b> Off-premises use, Recreational use, Three- wheeler type, Use by third parties</li> </ul>                                                                                                                                                                                                                 | <b>Number:</b>      |
| <b>BOATS – NOT FOR RENT - FR45523</b><br><ul style="list-style-type: none"> <li>Maximum 50 hp engine &amp; maximum 26 foot length</li> </ul>                                                                                                                                                                                                                                                       | <b>Number:</b>      |
| <b>BUNKHOUSE OR DORMITORY - FR09253</b><br><ul style="list-style-type: none"> <li>Total number of buildings (up to 12 beds count as one building)</li> </ul>                                                                                                                                                                                                                                       | <b>Number:</b>      |
| <b>DWELLINGS – OWNER OCCUPIED - FR09250</b><br><ul style="list-style-type: none"> <li>Owner Occupied only (rentals are rated under step 3)</li> <li>Mandatory: Stoves (coal, pellet or wood) must be installed to code or to manufacturer's specifications (when no local building codes apply). Space heaters &amp; portable kerosene heaters used as primary heat sources prohibited.</li> </ul> | <b>Number:</b>      |
| <b>LAKES OR RESERVOIRS - FR40017</b><br><ul style="list-style-type: none"> <li>Combine all into one total acreage figure</li> </ul>                                                                                                                                                                                                                                                                | <b>Total Acres:</b> |
| <b>SWIMMING POOLS - FR48925</b><br><ul style="list-style-type: none"> <li>Mandatory: Fully fenced, self locking gates, depth marked, rules posted, safety equipment provided.</li> <li>Only below ground pools are counted for rating purposes.</li> <li><b>Prohibited</b> - Diving boards or slides above 3 feet or 1 meter in height</li> </ul>                                                  | <b>Number:</b>      |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
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| <p><b>STORAGE TANKS – FLAMMABLES – ABOVE GROUND STORAGE (AST's)</b></p> <p>Check only those that apply:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Anhydrous Ammonia storage tank exceeding 500 gallons</li> <li><input type="checkbox"/> Individual above ground storage tank(s) (AST's) with more than 100 gallons of flammables</li> <li><input type="checkbox"/> Individual LPG bulk liquid storage tank with more than 2,000 gallons of LPG</li> <li><input type="checkbox"/> All Federal, State and Locally required precautions in place in regard to dikes to contain spills, vehicle barriers and warning signage to include 'No Smoking'</li> <li><input type="checkbox"/> All required inspections have been completed and all recommendations complied with</li> <li><input type="checkbox"/> All required permits in place and current</li> </ul> |
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| <p><b>TOTAL ANNUAL RECEIPTS FROM ALL OPERATIONS</b></p> <ul style="list-style-type: none"> <li>Include receipts from all farm, ranch, business activities or business pursuits intended to be covered under this policy</li> </ul> | <b>\$</b> |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|



**FARM and RANCH APPLICATION - LIABILITY**

| <b>ADDITIONAL INSURED (A.I.) - LOSS PAYEES – WAIVERS OF SUBROGATION</b>                                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Circle only those that apply: A.I.    Waiver of Subrogation    Loss Payee<br><br>Entity / Address:<br><br>Relationship to Insured: <input type="checkbox"/> Customer <input type="checkbox"/> Other: _____ |
| Circle only those that apply: A.I.    Waiver of Subrogation    Loss Payee<br><br>Entity / Address:<br><br>Relationship to Insured: <input type="checkbox"/> Customer <input type="checkbox"/> Other: _____ |
| Circle only those that apply: A.I.    Waiver of Subrogation    Loss Payee<br><br>Entity / Address:<br><br>Relationship to Insured: <input type="checkbox"/> Customer <input type="checkbox"/> Other: _____ |
| Circle only those that apply: A.I.    Waiver of Subrogation    Loss Payee<br><br>Entity / Address:<br><br>Relationship to Insured: <input type="checkbox"/> Customer <input type="checkbox"/> Other: _____ |
| Circle only those that apply: A.I.    Waiver of Subrogation    Loss Payee<br><br>Entity / Address:<br><br>Relationship to Insured: <input type="checkbox"/> Customer <input type="checkbox"/> Other: _____ |
| Circle only those that apply: A.I.    Waiver of Subrogation    Loss Payee<br><br>Entity / Address:<br><br>Relationship to Insured: <input type="checkbox"/> Customer <input type="checkbox"/> Other: _____ |
| Circle only those that apply: A.I.    Waiver of Subrogation    Loss Payee<br><br>Entity / Address:<br><br>Relationship to Insured: <input type="checkbox"/> Customer <input type="checkbox"/> Other: _____ |
| Circle only those that apply: A.I.    Waiver of Subrogation    Loss Payee<br><br>Entity / Address:<br><br>Relationship to Insured: <input type="checkbox"/> Customer <input type="checkbox"/> Other: _____ |
| Circle only those that apply: A.I.    Waiver of Subrogation    Loss Payee<br><br>Entity / Address:<br><br>Relationship to Insured: <input type="checkbox"/> Customer <input type="checkbox"/> Other: _____ |

**FARM and RANCH APPLICATION - PROPERTY**

**PROPERTY 'PER OCCURRENCE' DEDUCTIBLE (APPLIES TO COVERAGES A, B, C, D, E, F, G)**

\$500     
  \$1,000     
  \$2,500     
  \$5,000     
  \$10,000

**PROPERTY – FARM AND RANCH - WIND AND HAIL**

- Risks with property exposures in the following coastal states and some non-coastal states with tornado exposures may be subject to special wind and hail coverage restrictions:
  - AL, AR, CO, CT, DE, FL, GA, HI, IL, IA, KS, LA, ME, MD, MA, MN, MS, MT, NE, NH, NJ, NM, NY, NC, ND, RI, SC, SD, TX, VA, WI, WY

**PROPERTY COVERAGE A – DWELLINGS**  
**PROPERTY COVERAGE B – OTHER PRIVATE STRUCTURES APPURTENANT TO DWELLINGS**  
**PROPERTY COVERAGE C – HOUSEHOLD PERSONAL PROPERTY**  
**PROPERTY COVERAGE D – LOSS OF USE**

**Occupied, Seasonal Occupancy or Vacant:**

- Habitational Property to include Dwellings (owner occupied or third party occupied), Employee Housing (including employee dorms and employee bunkhouses) and Vacation Rentals are all eligible to be covered with any combination of Coverage A, B, C and/or D**

**Cause of Loss (Choose One):**     Basic       Broad       Special

**Coinsurance: 80%**

**Valuation – Coverages A & B (choose One):**     ACV       RC

**Valuation – Coverage C (choose One):**       ACV       RC

**Coverage Trigger for A, B, C and/or D:**

- A limit for A, B, C and/or D must be indicated for each Coverage individually**
- Declaring a Coverage A limit does not trigger coverage limits for Coverages B, C and/or D**

**Premium Charges:**

- A Coverage A limit will result in a waiver of premium charges for the following:
  - Cov B Limit – Up to 10% of Coverage A limit
  - Cov C Limit – Up to 50% of Coverage A limit
  - Cov D Limit – Up to 20% of Coverage A limit

| LOC #                                | BLDG # | Bldg Area                         | Construction | Year Built | Protection Class | Building Systems Updating<br>(Circle if updated within past 25 years)<br>Electrical Heating Plumbing Roof |
|--------------------------------------|--------|-----------------------------------|--------------|------------|------------------|-----------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Mobile home |        | A – Dwelling                      |              |            |                  | \$                                                                                                        |
|                                      |        | B – Personal Use Structures       |              |            |                  | \$                                                                                                        |
|                                      |        | C – Household Personal Property   |              |            |                  | \$                                                                                                        |
|                                      |        | D – Personal Property Loss of Use |              |            |                  | \$                                                                                                        |

**FARM and RANCH APPLICATION - PROPERTY – COVERAGES A THRU D**

| LOC #                                | BLDG # | Bldg Area                         | Construction | Year Built | Protection Class | Building Systems Updating<br>(Circle if updated within past 25 years)<br>Electrical Heating Plumbing Roof |
|--------------------------------------|--------|-----------------------------------|--------------|------------|------------------|-----------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Mobile home |        | A – Dwelling                      |              |            |                  | \$                                                                                                        |
|                                      |        | B – Personal Use Structures       |              |            |                  | \$                                                                                                        |
|                                      |        | C – Household Personal Property   |              |            |                  | \$                                                                                                        |
|                                      |        | D – Personal Property Loss of Use |              |            |                  | \$                                                                                                        |

| LOC #                                | BLDG # | Bldg Area                         | Construction | Year Built | Protection Class | Building Systems Updating<br>(Circle if updated within past 25 years)<br>Electrical Heating Plumbing Roof |
|--------------------------------------|--------|-----------------------------------|--------------|------------|------------------|-----------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Mobile home |        | A – Dwelling                      |              |            |                  | \$                                                                                                        |
|                                      |        | B – Personal Use Structures       |              |            |                  | \$                                                                                                        |
|                                      |        | C – Household Personal Property   |              |            |                  | \$                                                                                                        |
|                                      |        | D – Personal Property Loss of Use |              |            |                  | \$                                                                                                        |

| LOC #                                | BLDG # | Bldg Area                         | Construction | Year Built | Protection Class | Building Systems Updating<br>(Circle if updated within past 25 years)<br>Electrical Heating Plumbing Roof |
|--------------------------------------|--------|-----------------------------------|--------------|------------|------------------|-----------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Mobile home |        | A – Dwelling                      |              |            |                  | \$                                                                                                        |
|                                      |        | B – Personal Use Structures       |              |            |                  | \$                                                                                                        |
|                                      |        | C – Household Personal Property   |              |            |                  | \$                                                                                                        |
|                                      |        | D – Personal Property Loss of Use |              |            |                  | \$                                                                                                        |

| LOC #                                | BLDG # | Bldg Area                         | Construction | Year Built | Protection Class | Building Systems Updating<br>(Circle if updated within past 25 years)<br>Electrical Heating Plumbing Roof |
|--------------------------------------|--------|-----------------------------------|--------------|------------|------------------|-----------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Mobile home |        | A – Dwelling                      |              |            |                  | \$                                                                                                        |
|                                      |        | B – Personal Use Structures       |              |            |                  | \$                                                                                                        |
|                                      |        | C – Household Personal Property   |              |            |                  | \$                                                                                                        |
|                                      |        | D – Personal Property Loss of Use |              |            |                  | \$                                                                                                        |

| LOC #                                | BLDG # | Bldg Area                         | Construction | Year Built | Protection Class | Building Systems Updating<br>(Circle if updated within past 25 years)<br>Electrical Heating Plumbing Roof |
|--------------------------------------|--------|-----------------------------------|--------------|------------|------------------|-----------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Mobile home |        | A – Dwelling                      |              |            |                  | \$                                                                                                        |
|                                      |        | B – Personal Use Structures       |              |            |                  | \$                                                                                                        |
|                                      |        | C – Household Personal Property   |              |            |                  | \$                                                                                                        |
|                                      |        | D – Personal Property Loss of Use |              |            |                  | \$                                                                                                        |

**FARM and RANCH APPLICATION - PROPERTY – COVERAGE E**

| PROPERTY - COVERAGE E – SCHEDULED FARM PERSONAL PROPERTY                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |                            |               |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |
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| <p><b>Cause of Loss (Choose One):</b>    <input type="checkbox"/> Basic            <input type="checkbox"/> Broad</p> <p><b>Coinsurance: 80%</b></p> <p><b>Valuation: ACV at time of loss, RC subject to policy conditions</b></p> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |                            |               |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |
| #                                                                                                                                                                                                                                  | ITEM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | LIMIT OF INSURANCE                              |                            |               |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |
| 1                                                                                                                                                                                                                                  | <b>Grain, Beans, Ground feed, “Livestock” feed, Silage, Threshed seeds -</b><br><ul style="list-style-type: none"> <li>• In buildings, structures, sacks, trucks or wagons only</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | \$                                              |                            |               |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |
| 2                                                                                                                                                                                                                                  | <b>Grain</b> in stacks, shocks, swathes or piles –<br><ul style="list-style-type: none"> <li>• In the open only</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | \$                                              |                            |               |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |
| 3                                                                                                                                                                                                                                  | <b>Hay, Fodder, and/or Straw</b> – In buildings or structures only<br><ul style="list-style-type: none"> <li>• Maximum available limit is \$25,000</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | \$                                              |                            |               |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |
| 4                                                                                                                                                                                                                                  | <b>Hay, Fodder in stacks, windrows or bales and/or Straw</b> – In the open only<br><ul style="list-style-type: none"> <li>• Maximum available limit is \$10,000</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | \$                                              |                            |               |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |
| 5                                                                                                                                                                                                                                  | <b>Computers &amp; Related Software</b><br><ul style="list-style-type: none"> <li>• Use must include Farm, Ranch and/or Business Activities/Pursuits</li> <li>• Personal use only to be declared under Coverage C instead</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | \$                                              |                            |               |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |
| 6                                                                                                                                                                                                                                  | <b>Farm Products, Materials, Supplies</b><br><ul style="list-style-type: none"> <li>• But not hay, grain, feed, fodder, silage, seeds, straw (see # 1 &amp; # 2 above)</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                 |                            |               |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |
| 7                                                                                                                                                                                                                                  | <b>Misc. Equipment – Values are \$1,000 Per Item or Less</b><br><input type="checkbox"/> Check this box if limit includes beekeeper equipment<br><ul style="list-style-type: none"> <li>• Machinery, supplies, tools or vehicles usual or incidental to farm operations.</li> <li>• Declare as one blanket limit</li> <li>• Off-premises coverage only available if you schedule items individually under # 12 below</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | \$                                              |                            |               |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |
| 8                                                                                                                                                                                                                                  | <b>Rented/Borrowed - Equipment, Machinery and/or Farm Vehicles</b><br><ul style="list-style-type: none"> <li>• Declare all values, even if no written contract</li> <li>• Declare as one blanket limit</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | \$                                              |                            |               |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |
| 9                                                                                                                                                                                                                                  | <b>Trays, Boxes, Box shook</b> (i.e. unassembled wood crates)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | \$                                              |                            |               |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |
| 10                                                                                                                                                                                                                                 | <b>Farm Machinery, Equipment or Vehicles – Values exceed \$1000 per Item</b><br><input type="checkbox"/> Check this box if golf mobiles are scheduled below<br><input type="checkbox"/> Check this box if beekeeper equipment is scheduled below<br><ul style="list-style-type: none"> <li>• Items MUST be scheduled here if you need off- premises coverage</li> <li>• Blanket coverage not available for scheduled items</li> <li>• Loss on an individual item will be limited to the declared value for that item</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>Limit of Insurance on a ‘per item’ basis</b> |                            |               |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |
|                                                                                                                                                                                                                                    | <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Year</th> <th style="width: 70%;">Description – Make – Model</th> <th style="width: 20%;">Value of Item</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td style="text-align: center;">\$</td></tr> <tr><td> </td><td> </td><td style="text-align: center;">\$</td></tr> <tr><td> </td><td> </td><td style="text-align: center;">\$</td></tr> <tr><td> </td><td> </td><td style="text-align: center;">\$</td></tr> <tr><td> </td><td> </td><td style="text-align: center;">\$</td></tr> <tr><td> </td><td> </td><td style="text-align: center;">\$</td></tr> <tr><td> </td><td> </td><td style="text-align: center;">\$</td></tr> <tr><td> </td><td> </td><td style="text-align: center;">\$</td></tr> <tr><td> </td><td> </td><td style="text-align: center;">\$</td></tr> <tr><td> </td><td> </td><td style="text-align: center;">\$</td></tr> </tbody> </table> | Year                                            | Description – Make – Model | Value of Item |  |  | \$ |  |  | \$ |  |  | \$ |  |  | \$ |  |  | \$ |  |  | \$ |  |  | \$ |  |  | \$ |  |  | \$ |  |  | \$ |  |
| Year                                                                                                                                                                                                                               | Description – Make – Model                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Value of Item                                   |                            |               |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |
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| Schedule E continues on next page                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                 |                            |               |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |  |    |  |

**FARM and RANCH APPLICATION - PROPERTY – COVERAGE E**

| <b>PROPERTY - COVERAGE E – SCHEDULED FARM PERSONAL PROPERTY</b> (continued)                                                 |                                                                                                                                                                                                                                                                                                                             |  |                                                 |
|-----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------|
| <b>10</b>                                                                                                                   | <b>Farm Machinery, Equipment or Vehicles</b> (continued)                                                                                                                                                                                                                                                                    |  | <b>Limit of Insurance on a 'per item' basis</b> |
|                                                                                                                             | <b>Valued over \$1000 per Item</b> (continued) <ul style="list-style-type: none"> <li>• Items MUST be scheduled here if you need off- premises coverage.</li> <li>• Blanket coverage not available for scheduled items</li> <li>• Loss on an individual item will be limited to the declared value for that item</li> </ul> |  |                                                 |
| <b>Year</b>                                                                                                                 | <b>Description – Make - Model</b>                                                                                                                                                                                                                                                                                           |  | \$                                              |
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|                                                                                                                             |                                                                                                                                                                                                                                                                                                                             |  | \$                                              |
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                             |  | \$                                              |
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                             |  | \$                                              |
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                             |  | \$                                              |
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                             |  | \$                                              |
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                             |  | \$                                              |
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                             |  | \$                                              |
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                             |  | \$                                              |
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                             |  | \$                                              |
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                             |  | \$                                              |
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                             |  | \$                                              |
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                             |  | \$                                              |
| <b>SUBTOTAL OF LIMIT OF INSURANCE FOR FARM MACHINERY, EQUIPMENT OR VEHICLES VALUED OVER \$1000 – COVERAGE E – ITEM # 10</b> |                                                                                                                                                                                                                                                                                                                             |  | \$                                              |

**FARM and RANCH APPLICATION - PROPERTY – COVERAGE E and F**

| <b>PROPERTY - COVERAGE E – SCHEDULED FARM PERSONAL PROPERTY (continued)</b>                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                           |
|---------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| <i>Property coverage for Bees, Fish, "Livestock" or Worms does <u>not</u> include disease or mysterious disappearance</i> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                           |
| <b>#</b>                                                                                                                  | <b>ITEM</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>LIMIT OF INSURANCE</b> |
| 11                                                                                                                        | <b>"Livestock" - Actual Death/Destruction</b> <ul style="list-style-type: none"> <li>• Covers <u>property</u> loss (see types of loss covered under Basis or Broad Cause of Loss). Collision is only one type of loss covered if animal is killed</li> <li>• <b>Eligible:</b> <ul style="list-style-type: none"> <li>• Cattle, donkeys, goats, horses, mules, sheep, swine, and exotics (alpaca, bison, deer, llamas, yaks)</li> <li>• Describe unlisted exotic animal type here:</li> </ul> </li> <li>• <b>Limit of Insurance</b> = 'number of head' one year old or older times \$2,000 <b>plus</b> 'number of head' under one year old times \$1,000 <b>plus</b> the value of any animal above these values (appraisal required to document value)</li> <li>• <b>Maximum limit per head</b> - \$1,000 if animal is under one year of age, \$2,000 per head if one year old or older. Any animal to be valued higher must be declared, and the value must be supported by an appraisal.</li> <li>• <b>Prohibited</b> - Property coverage for birds (including poultry)</li> </ul> | \$                        |
| 12                                                                                                                        | <b>Bees</b> (Blanket Value) – Actual Death or Destruction                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | \$                        |
| 13                                                                                                                        | <b>Fish</b> (Blanket Value) – Actual Death or Destruction <ul style="list-style-type: none"> <li>• Only fish raised for food consumption are eligible for property coverage</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | \$                        |
| 14                                                                                                                        | <b>Worms</b> (Blanket Value) – Actual Death or Destruction                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | \$                        |
| 15                                                                                                                        | <b>"Livestock" - Collision Only</b> <ul style="list-style-type: none"> <li>• Covers <u>property</u> loss only due to collision if animal is killed</li> <li>• <b>Eligible:</b> <ul style="list-style-type: none"> <li>• Cattle, donkeys, goats, horses, mules, sheep, swine, and exotics (i.e. alpaca, bison, deer, llamas, yaks)</li> <li>• Describe unlisted exotic animal types here:</li> </ul> </li> <li>• <b>Limit of Insurance</b> = 'number of head' times \$1,000</li> <li>• <b>Maximum limit per head</b> - \$1,000</li> <li>• <b>Prohibited</b> - Property coverage for birds (including poultry)</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                             | \$                        |
| 16                                                                                                                        | Misc. (describe):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | \$                        |
| 17                                                                                                                        | Misc. (describe):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | \$                        |
| 18                                                                                                                        | Misc. (describe):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | \$                        |
| 19                                                                                                                        | Misc. (describe):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | \$                        |
| 20                                                                                                                        | Misc. (describe):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | \$                        |
| <b>TOTAL OF ALL COVERAGE E LIMITS OF INSURANCE</b>                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>\$</b>                 |

|                                                                                                                                                                                                                                                                                                                                         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>PROPERTY - COVERAGE F – UNSCHEDULED FARM PERSONAL PROPERTY</b></p> <p><b>LIMIT: \$5,000</b></p> <p><b>Cause of Loss (Choose One):</b>    <input type="checkbox"/> Basic            <input type="checkbox"/> Broad</p> <p><b>Coinurance: 80%</b></p> <p><b>Valuation: ACV at time of loss, RC subject to policy conditions</b></p> |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**FARM and RANCH APPLICATION - PROPERTY – COVERAGE G**

**PROPERTY - COVERAGE G - BARNs, OUTBUILDINGS AND OTHER FARM STRUCTURES**

Do not place habitational use structures here, See Coverage A, B, C and/or D

**Cause of Loss (Choose One):**     Basic             Broad

**Coinsurance: 80%**

**Valuation: ACV at time of loss, RC subject to policy conditions**

| LOC # - BLDG #                                     | COVERAGE G                                                       | LIMIT OF INSURANCE |
|----------------------------------------------------|------------------------------------------------------------------|--------------------|
| Loc:<br>Bldg:                                      | BLDG. AREA: _____ sq. ft.<br>DESCRIPTION-CONSTRUCTION-OCCUPANCY: | \$                 |
| Loc:<br>Bldg:                                      | BLDG. AREA: _____ sq. ft.<br>DESCRIPTION-CONSTRUCTION-OCCUPANCY: | \$                 |
| Loc:<br>Bldg:                                      | BLDG. AREA: _____ sq. ft.<br>DESCRIPTION-CONSTRUCTION-OCCUPANCY: | \$                 |
| Loc:<br>Bldg:                                      | BLDG. AREA: _____ sq. ft.<br>DESCRIPTION-CONSTRUCTION-OCCUPANCY: | \$                 |
| Loc:<br>Bldg:                                      | BLDG. AREA: _____ sq. ft.<br>DESCRIPTION-CONSTRUCTION-OCCUPANCY: | \$                 |
| Loc:<br>Bldg:                                      | BLDG. AREA: _____ sq. ft.<br>DESCRIPTION-CONSTRUCTION-OCCUPANCY: | \$                 |
| <b>TOTAL OF ALL COVERAGE G LIMITS OF INSURANCE</b> |                                                                  | <b>\$</b>          |

**FARM and RANCH APPLICATION - PROPERTY – OPTIONAL COVERAGES**

| PROPERTY COVERAGE(S) - OPTIONAL (Check to Trigger Coverage Option)                                                                                                                                                                                                                                                                                                                                                                                                                     | LIMIT OF INSURANCE |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| <input type="checkbox"/> <b>Disruption of Farming Operations</b> <ul style="list-style-type: none"> <li>• Blanket basis</li> <li>• Coinsurance is 80%</li> <li>• Does not provide coverage for business income related to 'Business Activities' or 'Business Pursuits'</li> <li>• Includes 'rental income'</li> </ul>                                                                                                                                                                  | \$                 |
| <input type="checkbox"/> <b>Farm and Ranch Equipment Breakdown</b>                                                                                                                                                                                                                                                                                                                                                                                                                     | Per Form U695      |
| <input type="checkbox"/> <b>Increased Special Limits for 'Business Personal Property':</b> <ul style="list-style-type: none"> <li>• Declare a higher sublimit here for 'Business Personal Property' under 'Coverage C – Household Personal Property'</li> <li>• Off Premises - 20% of on-premises limit will apply to off-premises exposures for 'Business Personal Property'</li> <li>• Sublimit does <u>not</u> increase the applicable limit of insurance for Coverage C</li> </ul> | \$                 |
| <input type="checkbox"/> <b>Milk Contamination:</b> <ul style="list-style-type: none"> <li>• Coverage for contamination of your milk, not milk of others</li> </ul>                                                                                                                                                                                                                                                                                                                    | \$10,000           |
| <input type="checkbox"/> <b>Theft Exclusion:</b> <ul style="list-style-type: none"> <li>• Total Theft Exclusion applicable to all property</li> </ul>                                                                                                                                                                                                                                                                                                                                  | NA                 |
| <input type="checkbox"/> <b>Theft Exclusion:</b> <ul style="list-style-type: none"> <li>• Applicable to All Property except 'Coverage C – Household Personal Property'</li> </ul>                                                                                                                                                                                                                                                                                                      | NA                 |
| <input type="checkbox"/> Misc. (Describe)                                                                                                                                                                                                                                                                                                                                                                                                                                              |                    |
| <input type="checkbox"/> Misc. (Describe)                                                                                                                                                                                                                                                                                                                                                                                                                                              |                    |
| <input type="checkbox"/> Misc. (Describe)                                                                                                                                                                                                                                                                                                                                                                                                                                              |                    |
| <input type="checkbox"/> Misc. (Describe)                                                                                                                                                                                                                                                                                                                                                                                                                                              |                    |





**NOTICE OF INSURANCE INFORMATION PRACTICES** - PERSONAL INFORMATION ABOUT YOU MAY BE COLLECTED FROM PERSONS OTHER THAN YOU IN CONNECTION WITH THIS APPLICATION FOR INSURANCE. SUCH INFORMATION AS WELL AS OTHER PERSONAL AND PRIVILEGED INFORMATION COLLECTED BY US OR OUR AGENTS MAY IN CERTAIN CIRCUMSTANCES BE DISCLOSED TO THIRD PARTIES WITHOUT YOUR AUTHORIZATION. YOU HAVE THE RIGHT TO REVIEW YOUR PERSONAL INFORMATION IN OUR FILES AND CAN REQUEST CORRECTION OF ANY INACCURACIES. A MORE DETAILED DESCRIPTION OF YOUR RIGHTS AND OUR PRACTICES REGARDING SUCH INFORMATION IS AVAILABLE UPON REQUEST. CONTACT YOUR AGENT OR BROKER FOR INSTRUCTIONS ON HOW TO SUBMIT A REQUEST TO US.

**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, DC, FL, HI, KS, MA, MN, NE, OH, OK, OR, VT or WA; in LA, ME, TN and VA, insurance benefits may also be denied)  
IN THE **DISTRICT OF COLUMBIA**, WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY 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.

IN **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.

IN **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.

IN **MASSACHUSETTS, NEBRASKA, OREGON AND VERMONT**, 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, MAY BE COMMITTING A FRAUDULENT INSURANCE ACT, WHICH MAY BE A CRIME AND MAY SUBJECT THE PERSON TO CRIMINAL AND CIVIL PENALTIES.

IN **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. IN 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.

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND REPRESENTS THAT REASONABLE ENQUIRY HAS BEEN MADE TO OBTAIN THE ANSWERS TO QUESTIONS ON THIS APPLICATION. HE/SHE REPRESENTS THAT THE ANSWERS ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.

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