



**FINANCIAL INTEREST INFORMATION**  
**TYPES = ADDITIONAL INSURED (AI) / LOSS PAYEE (LP)**

ITEM	TYPE	NAME / ADDRESS
<b>LOAN # / REFERENCE #</b>		

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**EXPOSURE(S)**

Any field left blank will indicate no exposure

In order to provide an accurate quote/premium charge; please provide the following information regarding the equine exposures on/off the insured premises and/or provided by the named insured.

OPERATION / EXPOSURE:	Yes or No	EXPOSURE INFORMATION (Required for Underwriting Review and Rating Information)	
Personal Horses		# HORSES OWNED	
Commercial Horse Owner		RECEIPTS - LEASED TO OTHERS	
Race Horse Owner		# RACE HORSES OWNED	
Breeding Horses		# HORSES OWNED AND NONOWNED	
		RECEIPTS	\$
Boarding Horses		# HORSES NONOWNED	
		RECEIPTS	\$
		RIDING FACILITIES ON SITE (Y OR N)	
Training - Horses Only		# HORSES NONOWNED	
		RECEIPTS	\$
		PAYROLL	\$
Riding Instruction		# STUDENT	
		RECEIPTS	\$
		GROUP LESSONS (Y OR N), NO MORE THAN 5 AT ONE TIME	\$

Independent Instructors (must be 18 years or older)		# INSTRUCTORS	
		RECEIPTS	\$
Equestrian Services - provided by the insured			
Animal Services (Specify Pg 4)		RECEIPTS	\$
Farrier		RECEIPTS	\$
Equine Therapy		RECEIPTS	\$
<b>EXPOSURE(S), cont'd</b> Any field left blank will indicate no exposure			
Events / Shows / Clinics		# EVENTS / SHOWS / CLINICS / CAMPS	
		# STUDENT / PARTICIPANTS	
		SPECTATORS (Y OR N), IF Y COMPLETE SPECTATOR SECTION	
Day Camps *Please note additional non-equine camp activities in additional information/description below.		# CAMP SESSIONS	
		# STUDENT / PARTICIPANTS	
		DO YOU OFFER OVERNIGHT CAMPS? YES OR NO?	
		IS THERE A SWIMMING POOL OR LAKE ON PREMISES? YES OR NO?	
		MINIMUM AGE OF CAMPERS?	
		RECEIPTS	\$
Riding Clubs		SQ FEET OF CLUB FACILITY	
		# MEMBERS	
		PUBLIC ALLOWED ON PREM (Y OR N), IF Y ESTIMATE COMPLETE SPECTATOR SECTION	
		FOOD OR ALCOHOL ALLOWED (Y OR N)	
Horse Participant		AVG # PARADES	
Events / Shows / Clinics - Spectator		GRANDSTANDS OR BLEACHERS CAPACITY <500 # EVENTS	
		GRANDSTANDS OR BLEACHERS CAPACITY 500-1000 # EVENTS	
		GRANDSTANDS OR BLEACHERS CAPACITY 1000+ # EVENTS	
Sales - Horses		AVG # HORSES SOLD ANNUALLY	
		RECEIPTS	\$
Sales - Tack, Clothing, Other (please describe on page 4)		RECEIPTS	\$

<b>OPTIONAL EQUINE COVERAGES</b>					
<b>Any field left blank will indicate no exposure and/or coverage requested</b>					
<b>Professional Equine Services Liability</b>			<b>Include Sales? YES OR NO</b>		
<b>Equine - CCC (Care, Custody, and Control)</b>			<b># HORSES NON OWNED</b>		
<b>SELECT LIMIT BELOW (PER HORSE / POLICY AGGREGATE)</b>					
	<b>5,000 / 25,000</b>		<b>15,000 / 150,000</b>		<b>100,000 / 300,000</b>
	<b>5,000 / 50,000</b>		<b>25,000 / 250,000</b>		<b>150,000 / 400,000</b>
	<b>10,000 / 50,000</b>		<b>50,000 / 250,000</b>		<b>200,000 / 500,000</b>
	<b>10,000 / 100,000</b>		<b>75,000 / 300,000</b>		
<b>REFERRAL / INELIGIBLE EXPOSURE(S)</b>					
If any of the following are answered "Y" by the Named Insured(s); we may decline or require additional underwriting information. Please contact your underwriter to review.					
	Any known animal related claims involving escape of animals and/or dog bites				
	Any Operations / Exposures not described on previous section? Please describe below				
	Agritainment - General Public allowed rental of horses, arenas, or facilities; Carriage/Sleigh/Hay Rides; Pony Parties; Airbnb / VRBO; Overnight Camps; Dude Ranches <b>(Ineligible)</b>				
	Does the insured carry Workers Compensation Insurance? Excluded/No Coverage will be offered under this policy.				
	No Hunting or Rough Stock Events On Premises <b>(ineligible)</b>				
	Repair of Tack or Riding Equipment for Others <b>(Ineligible)</b>				
	If applicable, is the Swimming Pool and/or Trampoline fenced?				
	Use of animals for Physical/Behavioral Therapy or Handicapped Instruction <b>(Ineligible)</b>				
<b>PREMISE(S) / OPERATION(S)</b>					
Insured must be able to answer "Y" to all of the following. Please describe any "N" responses on page 4.					
	24 Hour supervision of the farm premises.				
	Safety Program in place including instructions for all employees on what to do in case of an emergency.				
	All minors must be supervised by the insured or the insured's employees.				
	Alcohol is not permitted on the farm premises - in and around the Equine stables, paddocks, or while riding.				
	Gates and Fencing: Must be in good repair and checked on a regular basis. Wire fencing must be "Horse Safe" and must not be barbed.				
	Horse-proof latches must secure each stall.				
	Fire Extinguishers accessible and maintained in each stable				
	All Horse tack and related equipment must be well maintained and stored or kept in a separate, secure room.				
<b>SIGNS / SIGNAGE</b>					
<b>SIGNS / SIGNAGE must be posted where it can be easily seen/read:</b>					
Insured must be able to answer "Y" to all of the following. Please describe any "N" responses on page 4.					
	Emergency Phone Numbers clearly posted				
	No Smoking signs must be posted throughout the farm premises.				
	State specific Equine Liability Warning Signs posted per the State guidelines.				
	"Basic Rules" posted by insured.				

**CONTRACT(S) - BOARDING / BREEDING / RIDING / TRAINING**

Insured must be able to answer "Y" to all of the following. Please describe any "N" responses on page 4. Insured must obtain and maintain standard written signed contracts -

**1) Contracts must include the following, and 2) Copy of contract(s) will be required at time of binding coverage**

	Applicable State - Equine Activity Liability Act wording
	The insured must be held harmless in case of disease, illness, injury or death to the horse and/or its owner.
	The owner of the horse must accept responsibility for any damage caused by the horse to the insured's property.
	Student Riders are required to wear long pants, safety helmets and boots. All equipment must be supplied by the rider.
	Riders under the age of 18 must wear helmets at all times.
	Self Care Boarders must carry Private Horse Owner Liability naming the insured as Additional Insured
	Participants in Shows/Events/Clinics/Camps must sign Hold Harmless Agreement
	If Independent Riding Instructor(s) are on the insured premise they must provide to the Named Insured: 1) Hold Harmless agreement 2) Certificate of Insurance that provides the following: a) Description of insurance coverage b) Insurance Carrier, Policy Number, and Term c) Named Insured designated/described as an Additional Insured d) Matching liability limits equal to the limit of insurance described on the insureds insurance policy.

**ADDITIONAL INFORMATION / DESCRIPTIONS**

**STANDARD FRAUD WARNING:** Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and may subject such person to criminal and substantial civil penalties. (This wording does not apply in Oregon.)

- **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.

- **NEW JERSEY:** Any person who includes any false or misleading information on an application for an insurance policy is guilty of insurance fraud and is subject to criminal and civil penalties.

- **VIRGINIA:** It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

The undersigned hereby applies for insurance coverage as set forth in the application and affirms that the statements and representations made are to be best of his/her knowledge true.

\_\_\_\_\_  
**APPLICANT'S SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**AGENT'S SIGNATURE**

\_\_\_\_\_  
**DATE**