

HORSE SHOW / EVENT APPLICATION

Farm, Ranch, and Equine

GENERAL INFORMATION

| Policy # | | | | | | | | |
|----------------------------------|-----------|---------------|---------|--------------|--|-------------|--------------|----------------|
| Desired Coverage: | | 🗆 CGL Farm Li | ability | 1 | | 🗆 Equine L | iability Onl | у |
| Effective Date: Expiration Date: | | | | | | | | |
| New Business | 🗆 Renewal | 🗆 Rewrite | | Account Bill | | Direct Bill | Pay Plan | Choose an item |

AGENCY INFORMATION

| Agency Name: | Agency Code: |
|--------------------|--------------------|
| Sub-Producer Name: | Sub-Producer Code: |

APPLICANT INFORMATION

| Horseshow Org | ganization: | | | | | |
|---|--------------------|------|---------|---|--|--|
| Name of Show | : | | | | | |
| Show Manager | or Contact Person: | | | | | |
| Address: | | | | | | |
| City: | State: | Zip: | Website | : | | |
| Phone Number | r: | | Email: | | | |
| Entity Type: Corporation Individual/Sole Proprietor Joint Venture LLC Partnership Trust or Estate Other, Describe: | | | | | | |
| | | | | | | |

PRIOR CARRIER AND LOSS HISTORY (PREVIOUS 3 YEARS)

| Company | Type of Policy | Effective Date | Expiration Date | Annual Premium |
|---------|----------------|----------------|-----------------|----------------|
| | | | | |
| | | | | |
| | | | | |

LOSS HISTORY

 \Box No Losses (in last 3 years)

Loss Runs Attached

 \Box Apply Loss Free Credit

UNDERWRITING QUESTIONS

| 1. | Is any business other than farming conducted by the insured? If yes, explain: Describe all farming or horse-related operations: | □YES | □NO |
|----|---|------|-----|
| 2. | Does the insured rent or lease any land, buildings or stables to others? If yes, explain: | □YES | □NO |
| 3. | Overall maintenance and condition of the grounds, fencing and buildings: | | |

| 4. Are all fonces/gates in good conditions where the event is taking place? UYES INO How other are they checked and by whom? UYES INO Any wire foncing used on the premises? UYES INO What type (sample: high-tensils smooth or barbed wire, no climb or woven wire)? IYES INO Height of foncing: UYES INO Who is responsible for fence repair? IS the warm up area fenced? IYES INO Security on ste? UYES INO INO Ambulance or EMT? UYES INO Has any animal ever escaped? UYES INO If yes, please explain: IYES INO Number: Breed: UYES INO Do you allow your clients to bring their dogs? IYES INO If yes, please explain: IYES INO Do you allow your clients to bring their dogs? IYES INO If yes, please explain: IYES INO Do you allow your clients to some events? IYES INO If yes, please explain: IYES INO If yes, please explain: IYES INO <t< th=""><th></th><th></th><th></th><th></th></t<> | | | | | | | |
|--|-----|--|------|-----|--|--|--|
| What type (example: high-tensile smooth or barbed wike, no climb or woven wire)? If the work is used, placed describe hype of fencing: If the work is used, placed describe hype of fencing: If the work is used, placed describe hype of fencing: If the work is used, placed describe hype of fencing: If the work is used, placed describe hype of fencing: If the work is used, placed describe hype of fencing: If the work is used, placed describe hype of fencing: If the work is used, placed describe hype of fencing: If the work is used, placed describe hype of fencing: If the work is used, placed describe hype of fencing: If the work is used, placed describe hype of fencing: If the work is used, placed describe hype of fencing: If the work is used, placed describe hype of fencing: If the work is used, placed describe hype of fencing: If the work is used, placed describe hype of fencing: If the work is used, placed describe: If the work is used, placed describe | 4. | | □YES | □NO | | | |
| integrit of fencing: | | What type (example: high-tensile smooth or barbed wire, no climb or woven wire)? | □YES | □NO | | | |
| Is the warm up area fenced? IVES INO Security on site? IVES INO Ambulance or EMT? IVES INO Has any animal ever escape? IVES INO If yes, please explain: IVES INO 5. Does the insured have dogs? IVES INO Number: Breed: IVES INO Do you allow your clients to bring their dogs? IVES INO If yes, on leashes:::IVES INO IVES INO Do gibitten or caused injury to anyone? IVES INO IVES INO If yes, please explain: IVES INO IVES INO Any recreational vehicles, such as ATVs or golf carts on the premises? IVES INO If yes, mease asthows or events? IVES INO Leased or rented from show or event? IVES INO Any youthful driver? IVES INO I. Is there 24-hour supervision of the facility? If yes, please describe: IVES INO I. Is inding facilities:: Indidor Arena IOpen Fields ITrails IVES INO I. Is alochol consumption allowed on the premiseses | | | □YES | □NO | | | |
| b to Walling at a ferceu: UYES INO Security on site? UYES INO Ambulance or EMT? UYES INO Has any animal ever escaped? UYES INO If yes, please explain: Dress INO 5. Does the insured have dogs? Breed; INO Do you have dogs on the premises? IVES INO Do you allow your clients to bring their dogs? IVES INO Do go litten or caused injury to anyone? IVES INO If yes, please explain: IVES INO Any recreational vehicles, such as ATVs or golf carts on the premises? IVES INO If yes, number and type: IVES INO IVES INO Any recreational vehicles, such as ATVs or golf carts on the premises? IVES INO If yes, number and type: IVES INO IVES INO Any recreational vehicles, such as ATVs or golf carts on the premises? IVES INO Any recreational vehicles, such as ATVs or golf carts on the premises? IVES INO Any contractional vehicles, such as ATVs or golf carts on the premises? IVES INO | | Who is responsible for fence repair? | | | | | |
| Ambulance or EM1? □PES □N0 Has any animal ever escaped? □PES □N0 ff yes, please explain: □PES □N0 S. Does the insured have dogs? □PES □N0 Number: Breed: □PES □N0 Number: Breed: □PES □N0 Do you allow your clients to bring their dogs? □PES □N0 ff yes, nearestimative days on the premises? □PES □N0 Do glitten or caused injury to anyone? □PES □N0 ff yes, please explain: □PES □N0 Any recreational vehicles, such as ATVs or golf carts on the premises? □PES □N0 ff yes, number and type: □PES □N0 □PES □N0 Nary recreational vehicles, such as ATVs or golf carts on the premises? □PES □N0 Is allowed to use? □PES □N0 □PES □N0 Nary countul driver? □PES □N0 □PES □N0 Is alcohal consumption allowed on the premises? □PES □N0 □NES □N0 Is alcohal consumption allowed on the premises? □PES □N0 □NES | | Is the warm up area fenced? | □YES | □NO | | | |
| Has any animal ever escaped? If yes, please explain: IVES INO 5. Does the insured have dogs? Number: Breed: IVES INO Do you have dogs on the premises? Number: Breed: IVES INO Do you allow your clients to bring their dogs? If yes, neteashes: IVES INO Ob go bitten or caused injury to anyone? IVES INO 6. Any recreational vehicles, such as ATVs or golf carts on the premises? If yes, number and type: IVES INO 6. Any recreational vehicles, such as ATVs or golf carts on the premises? If yes, number and type: IVES INO 7. Is there 24-hour supervision of the facility? If yes, please describe: IVES INO 8. Rding facilities: Indoor Arena IOpen Fields ITraits 9. Does the insured obtain a hold harmless release signed by boarders and students releving them of claims for Bodily injury and Property Damage? Is yes, please attack a copy to the application. IVES INO 10. Do you have workers' Compensation insurance? Mote: Workers' Compensation insurance? If yes, please explain: IVES INO 12. Do you require all individual under the age of 18 to wear approved safety helmet at all times while riding on your premises? If yes, please explain: IVES INO 13. Do you sell any tack or clothing? If yes, please explain: | | Security on site? | □YES | □NO | | | |
| If yes, please explain: IVES INO So Does the insured have dogs? Number: Breed: IVES INO Do you have dogs on the premises? Number: Breed: IVES INO Do you allow your clients to bring their dogs? IVES INO Do go the or caused injury to anyone? IVES INO F yes, neaseexplain: IVES INO Any recreational vehicles, such as ATVs or golf carts on the premises? IVES INO Keys, number and type: IVES INO IVES INO Any youthful driver? IVES INO IVES INO Riding facilities: Indoor Arena IDopen Fields ITraits IVES INO 10. Do you have Workers' Compensation Insurance? IVES INO IVES INO 11. Is alcohol cosumption allowed on the premises? If yes, please explain: IVES INO 12. Do you require all individual under the a | | Ambulance or EMT? | □YES | □NO | | | |
| Number: Breed: Do you have dogs on the premises? IVES Number: Breed: Do you allow your clients to bring their dogs? IVES If yes, on leashes: IVES Do go bitten or caused injury to anyone? IVES If yes, not eashes: IVES If yes, noteashes: IVES Number and type: IVES Who is allowed to use? IVES Used of premises at shows or events? IVES Leased or rented from show or event? IVES Any youthul driver? IVES No IVES No IVES Bodig facilities: Indoor Arena IOutdoor Arena IOpen Fields ITrails Ob you have Workers' Compensation and Employer's Liability is not covered under this policy. IVES 10. Do you have Workers' Compensation and Employer's Liability is not covered under this policy. IVES 11. Is alcohol consumption allowed on the premises? IVES 12. Do you require all individual under the age of 18 to wear approved safety helmet at all times while riding on your premises? IVES 13. Do you prepara any tack or riding equipment? IVES INO 14. Do you repara any tack or riding eq | | | □YES | □NO | | | |
| Number: Breed: Do you allow your clients to bring their dogs? If yes, on leashes: PYES Dog bitter or caused injury to anyone? PYES If yes, please explain: PYES Any recreational vehicles, such as ATVs or golf carts on the premises? If yes, please explain vehicles, such as ATVs or golf carts on the premises? PYES If yes, number and type: PYES Who is allowed to use? PYES Used off premises at shows or event? PYES Leased or rented from show or event? PYES Any youthful driver? PYES No St there 24-hour supervision of the facility? If yes, please describe: Poes the insured obtain a hold harmless release signed by boarders and students relieving them of claims for Bodily injury and Property Damage? Is yes, please attach a copy to the application. 10. Do you have Workers' Compensation Insurance? Note: Workers' Compensation Insurance? Note: Workers' Compensation and Employer's Liability is not covered under this policy. PYES NO 11. Is alcohol consumption and Employer's Liability is not covered under this policy. PYES NO 12. Do you require all individual under the age of 18 to wear approved safety helmet at all times while riding on your premises? If yes, please explain: PYES NO 13. Do yousel any tack or clothing? If yes, please explain: | 5. | | □YES | □NO | | | |
| If yes, on leashes: □YES □NO Dog bitten or caused injury to anyone? □YES □NO If yes, please explain: □YES □NO 6. Arry recreational vehicles, such as ATVs or golf carts on the premises? □YES □NO 1f yes, number and type: □YES □NO Who is allowed to use? □YES □NO Leased or rented from show or events? □YES □NO Any youthful driver? □YES □NO 7. Is there 24-hour supervision of the facility? If yes, please describe: □YES □NO 8. Riding facilities: □Indoor Arena □Outoor Arena □Open Fields □Trails □YES □NO 9. Does the insured obtain a hold harmless release signed by boarders and students relieving them of claims for Bodily Injury and Property Damage? Is yes, please attach a copy to the application. □YES □NO 10. Do you have Workers' Compensation insurance? □YES □NO □NO 12. Do you require all individual under the age of 18 to wear approved safety helmet at all times while riding on your premises? □YES □NO 13. Do you sell any tack or ridoting? □YES □NO □NO □YES □NO 14. Do you provide, any tack or ridoting? □YES □NO □NO | | | □YES | □NO | | | |
| If yes, please explain: | | | □YES | □NO | | | |
| If yes, number and type: Who is allowed to use? Who is allowed to use? Used off premises at shows or events? PYES INO Any youthful driver? IVES INO 7. Is there 24-hour supervision of the facility? If yes, please describe: IVES INO 8. Riding facilities: IIndoor Arena IIOutdoor Arena IIOpen Fields IITrails IVES INO 9. Does the insured obtain a hold harmless release signed by boarders and students relieving them of claims for Bodily Injury and Property Damage? Is yes, please attach a copy to the application. IVES INO 10. Do you have Workers' Compensation Insurance? IVES INO IVES INO 11. Is alcohol consumption allowed on the premises? If yes, please explain: IVES INO 12. Do you require all individual under the age of 18 to wear approved safety helmet at all times while riding on your premises? If no, please explain: IVES INO 13. Do you guell any tack or clothing? If yes, please explain: IVES INO 14. Do you repair any tack or clothing? If yes, please explain: IVES INO 15. Do you provide any type of feed for sale to the general public? If yes, please explain: INO 15. Do you provide, prepare any type of feed for sale to the general | | | | | | | |
| Leased or rented from show or event? Any youthful driver? Ints Ints Ints Ints Any youthful driver? Ints Ints <td>6.</td> <td>If yes, number and type:</td> <td>□YES</td> <td>□NO</td> | 6. | If yes, number and type: | □YES | □NO | | | |
| Any youthful driver? Into Into Any youthful driver? Into Into Any youthful driver? Into Into Is there 24-hour supervision of the facility? If yes, please describe: Import 20 Riding facilities: Indoor Arena Into and Componer Fields Intraits Import 20 9. Does the insured obtain a hold harmless release signed by boarders and students relieving them of claims for Bodily Injury and Property Damage? Is yes, please attach a copy to the application. Import 20 10. Do you have Workers' Compensation Insurance? Import 20 Import 20 Not: Workers' Compensation and Employer's Liability is not covered under this policy. Import 20 Import 20 11. Is alcohol consumption allowed on the premises? Import 20 Import 20 Import 20 12. Do you require all individual under the age of 18 to wear approved safety helmet at all times while riding on your premises? Import 20 Import 20 13. Do you sell any tack or clothing? If yes, please explain: Import 20 Import 20 Import 20 14. Do you prepare any type of farrier services? If yes, please explain: Import 20 Import 20 Import 20 15. Do you provide any type of farrier services? If yes, please explain: Import 20 Im | | | □YES | □NO | | | |
| In the 24-hour supervision of the facility? If yes, please describe: Intesting in the insure of the insure of the facility? If yes, please describe: Intesting in the insure of the facility? If yes, please describe: 9. Does the insure of obtain a hold harmless release signed by boarders and students relieving them of claims for Bodily injury and Property Damage? Is yes, please attach a copy to the application. Intesting in the insure of the insure | | | □YES | □NO | | | |
| 8. Riding facilities: Indoor Arena Outdoor Arena Open Fields Trails 9. Does the insured obtain a hold harmless release signed by boarders and students relieving them of claims for Bodily Injury and Property Damage? Is yes, please attach a copy to the application. INO 10. Do you have Workers' Compensation Insurance? Note: Workers' Compensation and Employer's Liability is not covered under this policy. IYES INO 11. Is alcohol consumption allowed on the premises? If yes, please explain: IYES INO 12. Do you require all individual under the age of 18 to wear approved safety helmet at all times while riding on your premises? If no, please explain: IYES INO 13. Do you sell any tack or clothing? If yes, please explain: IYES INO 14. Do you provide any type of farrier services? If yes, please explain: IYES INO 15. Do you provide, prepare any type of feed for sale to the general public? If yes, please explain: IYES INO 17. How do you dispose of the animal waste? IYES INO 18. What is the minimum age of participant? IYES INO 19. Are all of the followed posted clearly? Mos Smoking Signs: IYES INO | _ | | | | | | |
| 9. Does the insured obtain a hold harmless release signed by boarders and students relieving them of claims for Bodily Injury and Property Damage? Is yes, please attach a copy to the application. □YES □NO 10. Do you have Workers' Compensation Insurance? Note: Workers' Compensation and Employer's Liability is not covered under this policy. □YES □NO 11. Is alcohol consumption allowed on the premises? If yes, please explain: □YES □NO 12. Do you require all individual under the age of 18 to wear approved safety helmet at all times while riding on your premises? If no, please explain: □YES □NO 13. Do you sell any tack or clothing? If yes, what are the annual receipts? □YES □NO 14. Do you repair any tack or riding equipment? If yes, please explain: □YES □NO 15. Do you provide any type of farrier services? If yes, please explain: □YES □NO 16. Do you provide, prepare any type of feed for sale to the general public? If yes, please explain: □YES □NO 16. Do you dispose of the animal waste? □YES □NO 17. How do you dispose of the animal waste? □YES □NO 18. What is the minimum age of participant? □YES □NO 19. Are all of the followed posted clearly? □YES □NO 19. Are all of the followed posted clearly? □YES □NO <td></td> <td></td> <td>□YES</td> <td>□NO</td> | | | □YES | □NO | | | |
| Bodily Injury and Property Damage? Is yes, please attach a copy to the application. IVES INO 10. Do you have Workers' Compensation Insurance? Note: Workers' Compensation and Employer's Liability is not covered under this policy. IVES INO 11. Is alcohol consumption allowed on the premises? If yes, please explain: IVES INO 12. Do you require all individual under the age of 18 to wear approved safety helmet at all times while riding on your premises? If no, please explain: IVES INO 13. Do you sell any tack or clothing? If yes, please explain: IVES INO 14. Do you repair any tack or riding equipment? If yes, please explain: IVES INO 15. Do you provide any type of farrier services? If yes, please explain: IVES INO 16. Do you provide, prepare any type of feed for sale to the general public? If yes, please explain: IVES INO 17. How do you dispose of the animal waste? IVES INO 18. What is the minimum age of participant? IVES INO 19. Are all of the followed posted clearly? IVES INO 19. Are all of the followed posted clearly? No Smoking Signs: IVES INO III. Is alcohol on Smoking Signs: IVES INO | | | | | | | |
| Note: Workers' Compensation and Employer's Liability is not covered under this policy. IPES INO 11. Is alcohol consumption allowed on the premises? If yes, please explain: IPES INO 12. Do you require all individual under the age of 18 to wear approved safety helmet at all times while riding on your premises? If no, please explain: IPES INO 13. Do you sell any tack or clothing? If yes, what are the annual receipts? IPES INO 14. Do you repair any tack or riding equipment? If yes, please explain: IPES INO 15. Do you provide any type of farrier services? If yes, please explain: IPES INO 16. Do you provide, prepare any type of feed for sale to the general public? If yes, please explain: IPES INO 17. How do you dispose of the animal waste? IPES INO 18. What is the minimum age of participant? IPES INO 19. Are all of the followed posted clearly? IPES INO IF How do you dispose of the animal waste: IF YES INO IPES INO IF Emergency Phone Numbers: No Smoking Signs: IPES INO IPES INO | | Bodily Injury and Property Damage? Is yes, please attach a copy to the application. | □YES | □NO | | | |
| If yes, please explain: IYES INO 12. Do you require all individual under the age of 18 to wear approved safety helmet at all times while riding on your premises? If no, please explain: IYES INO 13. Do you sell any tack or clothing? If yes, what are the annual receipts? IYES INO 14. Do you repair any tack or riding equipment? If yes, please explain: IYES INO 15. Do you provide any type of farrier services? If yes, please explain: IYES INO 16. Do you provide, prepare any type of feed for sale to the general public? If yes, please explain: IYES INO 17. How do you dispose of the animal waste? IYES INO 18. What is the minimum age of participant? IYES INO 19. Are all of the followed posted clearly? IYES INO Emergency Phone Numbers: Safety and Barn Rules: No Smoking Signs: IYES INO IYES INO IYES INO | | Note: Workers' Compensation and Employer's Liability is not covered under this policy. | □YES | □NO | | | |
| your premises? If no, please explain: 13. Do you sell any tack or clothing? If yes, what are the annual receipts? 14. Do you repair any tack or riding equipment? If yes, please explain: 15. Do you provide any type of farrier services? If yes, please explain: 16. Do you provide, prepare any type of feed for sale to the general public? If yes, please explain: 16. Do you provide, prepare any type of feed for sale to the general public? If yes, please explain: 17. How do you dispose of the animal waste? 18. What is the minimum age of participant? 19. Are all of the followed posted clearly? Emergency Phone Numbers: Safety and Barn Rules: NO No Smoking Signs: YES NO YES NO YES NO YES NO | 11. | | □YES | □NO | | | |
| If yes, what are the annual receipts? If yes, what are the annual receipts? If yes, what are the annual receipts? If yes, please annual r | 12. | your premises? | □YES | □NO | | | |
| If yes, please explain: IVES INO 15. Do you provide any type of farrier services? If yes, please explain: IVES INO 16. Do you provide, prepare any type of feed for sale to the general public? If yes, please explain: IVES INO 16. Do you provide, prepare any type of feed for sale to the general public? If yes, please explain: IVES INO 17. How do you dispose of the animal waste? IVES INO 18. What is the minimum age of participant? IVES IVES 19. Are all of the followed posted clearly? IVES INO Safety and Barn Rules: No Smoking Signs: IVES INO IVES INO IVES INO | 13. | | □YES | □NO | | | |
| If yes, please explain: ITES INO 16. Do you provide, prepare any type of feed for sale to the general public? If yes, please explain: Implies Integration of the general public? Implies Integratinget public? Implies Integene | | If yes, please explain: | □YES | □NO | | | |
| If yes, please explain: ITES INO 17. How do you dispose of the animal waste? 18. What is the minimum age of participant? 19. Are all of the followed posted clearly? 19. Are all of the followed posted clearly? Emergency Phone Numbers: IYES INO Safety and Barn Rules: IYES INO INO No Smoking Signs: IYES INO | | If yes, please explain: | | | | | |
| 18. What is the minimum age of participant? 19. Are all of the followed posted clearly? Emergency Phone Numbers: □YES Safety and Barn Rules: □YES No Smoking Signs: □YES | | If yes, please explain: | □YES | □NO | | | |
| 19. Are all of the followed posted clearly? Emergency Phone Numbers: □YES Safety and Barn Rules: □YES NO □YES No Smoking Signs: □YES | | | | | | | |
| Emergency Phone Numbers: UYES NO Safety and Barn Rules: UYES NO No Smoking Signs: UYES NO | | | | | | | |
| Safety and Barn Rules: □YES □NO No Smoking Signs: □YES □NO | | | | | | | |
| No Smoking Signs: YES NO | | | | | | | |
| | | No Smoking Signs: YES NO | | | | | |
| | | | | | | | |

CERTIFICATES OF INSURANCE REQUESTED

 \Box Certificate Holder Only

□ Additional Insured, Subject to Company Approval

| Owner of Premises: | | |
|--|---|-------------|
| Name: | | Location #: |
| Mailing Address / City / State Zip | : | |
| Certificate Holder Only | \square Additional Insured, Subject to Company Approval | |
| \Box Other (Explain insurable interest, if any | ·): | |
| Name: | | |
| Mailing Address / City / State Zip | : | |

SHOW / EVENT INFORMATION

| Estimated Entries: | Estimated Spectat | ors per Day: | Day: Estimated Gross Gate Receipts (for shows running more than for days): | | | | |
|--|---|---------------------|--|----------------|----------------|--|--|
| Seating: | | Arena Type: | Seating Capacity: | | pacity: | | |
| 🗆 Grandstands 🗆 Blea | achers | □ Indoor □ Outo | tdoor | | | | |
| Is your show recognize | d by any national a | ssociation? | | | | | |
| 🗆 Yes 🗆 No Competit | tion # | | | | | | |
| Do you obtain a signed | Do you obtain a signed release from all entrants? | | | | | | |
| □ Yes □ No Please | attach a copy of th | e Release to this a | pplication. | | | | |
| NOTE: HAVE YOU HAD | ANY CLAIMS IN THE | PAST THREE YEAR | S? □ Yes □ No | INITIAL HER | RE: | | |
| IF "YES," PROVIDE DET | AILS ON A SEPARAT | E SHEET OF PAPER | R AND ATTACH TO |) THIS APPLI | CATION. | | |
| Show Dates: | | Move In Date: | | | Move Out Date: | | |
| Show Dates: | | Move In Date: | | | Move Out Date: | | |
| Show Dates: Move In Date: Move Out Date: | | | | Move Out Date: | | | |

SHOW / EVENT LOCATION

| LOC # | LEGAL DESCRIPTION (Include County, State, Zip Code or Section, Township & Range) | # of Acres | Owned | Leased | Other | # of Years at this location |
|----------|---|------------|-------|--------|-------|-----------------------------|
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |

LIABILITY SECTION

| CGL Farm Liability | | | | | | | |
|---|-------------------------------|---------------------|---------|--|--|--|--|
| REQUESTED LIMITS OF LIABILITY (PER OCCURRENCE) | | | | | | | |
| □ \$300,000 OCC / \$600,000 | □ \$500,000 OCC / \$1,000,000 | □ \$1,000,000 OCC / | OTHER / | | | | |
| AGG | AGG | \$2,000,000 AGG | | | | | |
| \$5,000 MEDICAL PAYMENTS COVERAGE IS INCLUDED. \$50,000 FIRE LEGAL LIABILITY IS INCLUDED. INQUIRE ABOUT THE | | | | | | | |
| AVAILABLITY OF HIGHER LIMITS AND TRIPLE AGGREGATE. | | | | | | | |

CGL FARM LIABILITY ONLY

Deductible Type □N/A □ PD Deductible Basis - □\$1,000 □\$3,000 □\$5,000 Per Occurrence □ Damage to Premises Rented to You (\$100,000 included) Increase to: □\$300,000 □\$500,000 □ \$750,000 □\$1,000,000 Personal and Advertising Injury - □ Include □ Exclude

EXCLUSION: CG 21 01 - Athletic or Sports Participation will be attached to your policy - See form for specific exclusion

FRAUD WARNING:

In AL, AR, DC, LA, MD, NM, RI and WV: Any person who knowingly (or willfully)* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)* presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. *Applies in MD Only.

In CO: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

In FL and OK: 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)*. *Applies in FL Only.

In KS: Any person who commits a fraudulent insurance act is guilty of a crime and may be subject to restitution, fines and confinement in prison. A fraudulent insurance act means an act committed by 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 or insurance agent or broker, any written, electronic, electronic impulse, facsimile, magnetic, oral, or telephonic communication or statement as part of, or in support of, an application for insurance, or the rating of an insurance policy, or a claim for payment or other benefit under an insurance policy, 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.

In KY, NY, OH and PA: 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 subjects such person to criminal and civil penalties (not to exceed five thousand dollars and the stated value of the claim for each such violation)*. *Applies in NY Only.

In ME, TN, VA and WA: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties (may)* include imprisonment, fines and denial of insurance benefits. *Applies in ME Only.

In NJ: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

In OR: Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

In PR: Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars (\$5,000) and not more than ten thousand dollars (\$10,000) or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances [be] present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years. I hereby certify that I am an authorized representative of the applicant and to the best of my knowledge and belief the information provided is true and correct and that no information which would materially affect this insurance has been withheld.

If there are any material changes in your stable operations during the policy year, please notify your agent at once.

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

| INSURED'S SIGNATURE | DATE | AGENT'S SIGNATURE | DATE |
|---------------------|------|-------------------|------|
| x | / / | x | / / |

IMPORTANT - ORIGINAL MUST BE RETURNED

INSURED'S SIGNATURE IS NEEDED TO PROVIDE A FIRM QUOTE AND IN ORDER TO BIND COVERAGE