

# National Risk | *Solutions*

Thank you for choosing National Risk Solutions. We look forward to providing you with a quick, competitive quote.

Please complete the following application in its entirety and include any pertinent underwriting information. Also, please be sure to include a fax # or email below where we may return your quote promptly.

Once complete please:

1. Click Submit button here → to email your application

OR

2. Fax application to (877)743-4252

If you have any questions, please do not hesitate to contact us at (866) 417-4855.

We appreciate your business.

Sincerely,

*The National Risk Solutions Team*

Agency Name:

City, State, Zip:

Agency contact:

Email Address:

Phone Number:

Fax Number:

Additional Information:



# Supplemental Farm Application - Personal Umbrella Product

All questions must be answered and application must be signed by the applicant to receive a New Business or Renewal quote.

Name of applicant: \_\_\_\_\_ Name of Farm: \_\_\_\_\_

Web site address for applicants farm: \_\_\_\_\_

Named insured as it appears on underlying farm policy(s): \_\_\_\_\_

Is the underlying farm liability provided in a personal lines policy?  Yes  No

Underlying carrier for farm liability: \_\_\_\_\_ Limit of liability: \_\_\_\_\_

Ownership:  Individual  Partnership  Corporation  Other (specify): \_\_\_\_\_

Description of farm operations: \_\_\_\_\_

Amount of annual gross receipts from insured operated farm operations \$ \_\_\_\_\_

**Location Information:**

Location	Total Acres	Operated By Insured	Leased to Others	Describe Operation
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

**Lakes/Reservoirs:**

	Number of	# Acres for each	Fenced?
Ponds			<input type="checkbox"/> Yes <input type="checkbox"/> No
Lakes			<input type="checkbox"/> Yes <input type="checkbox"/> No
Reservoirs			<input type="checkbox"/> Yes <input type="checkbox"/> No

**Farm Animal Information:**

Animal Type	Number of	Owned By Applicant?	Owned by those leasing Applicant Farm Acreage?
Head of Grazing Livestock: (Cattle, Dairy Cows, Buffalo, Goats, Sheep, etc.)		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Horses/Saddle Animals		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Swine		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Small animals (Rabbit, Fox, Mink, etc.)		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Poultry		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Poultry Coops/Swine Houses		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Automobiles (Vehicles licensed for road use including Farm Trucks & Implements; Motor Homes; Motorcycles):**

Year/Make/Model	Underlying Carrier	Policy Number	Limits of Liability
1.			
2.			
3.			
4.			

**Recreational Vehicles (Vehicles not licensed for road use)**

Year/Make/Model	Underlying Carrier	Policy Number	Limits of Liability
1.			
2.			
3.			
4.			

**Eligibility Questions**

**Please answer the following questions.**

**For any "Yes" response, please provide complete information in remarks area.**

- |   |                              |                             |
|---|------------------------------|-----------------------------|
| 1. Does the farm operation include any manufacturing, processing or slaughtering?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Are farm vehicles, implements or trucks operated outside a 50 mile radius of the principal farm location?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Do any of the farm trucks carry goods for others?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Does the applicant conduct any logging, lumber or saw-mill operations?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Is there a dude ranch or bed and breakfast operated at any location?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Other than road-side vegetable stands, is the public permitted or invited on any premises for pick-your-own operations, sales, shows, auctions, hayrides, mazes or cut-your-own tree or nursery sales? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7. Are there any other business activities other than farming or ranching conducted at any location?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 8. Is any farm equipment rented or leased to others?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 9. Are there grain elevator operations other than storage of the applicant's own grain on any premises?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 10. Are there any applicant operated oil or gas pumping wells or above ground pipelines at any location?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 11. Is there a dam of any kind at any location?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 12. Are there any sinkholes, quarries, caves, mines, dumps or landfills at any location?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 13. Does the farm include a confined animal feeding operation?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 14. Are there any veterinarian services performed by the applicant or any employee at any location?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 15. Does the applicant board, breed, race, train, provide lessons or rent stable space to others for horses at any location?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 16. Does the applicant provide horse or saddle animal rental of any kind to others?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 17. Does any underlying liability policy contain any sub-limit, have reduced limits of liability or specifically exclude any coverage for any animals?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 18. Within the next 12 months, will there be any hydraulic fracture drilling, commonly known as "fracking", at any location to be insured?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Remarks:

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of broker