

VAN WAGONER COMPANIES, INC.

1134 COMMERCE DRIVE • RICHARDSON, TX 75081 • TELEPHONE 972-331-6566 • FAX 972-331-6599

Farm and Ranch Application

Applicant: _____ Farm Name _____

Mailing Address _____

City _____ State _____ Zip _____

Farm Phone# _____ Person to contact for inspection: _____

Applicant's Social Security # _____ - _____ - _____ Date of Birth _____

Name of Spouse and/or Partner _____

Social Security # _____ - _____ - _____ Date of Birth _____

Principal Occupation _____

Applicant is: Owner Operator Absentee Owner Tenant Farmer Individual Manager
 Corporation Partnership Other; Specify _____

Desired Effective Date: _____

Are mortgage payments current? Yes No

Mortgagee and Address: _____

Loss Payee(s) and Address(es): _____

Total Number of Acres: _____ Owned _____ Rented _____

Principal Products of this Farm: _____

Gross receipts: _____

Other Business Pursuits (Explain): _____

Is farm used or leased for recreational use? Yes No Explain: _____

RISK LOCATIONS

1. _____
How many miles from city limits _____ How many acres _____ County _____

2. _____
How many miles from city limits _____ How many acres _____ County _____

3. _____
How many miles from city limits _____ How many acres _____ County _____

4. _____
How many miles from city limits _____ How many acres _____ County _____

PREMIUM INFORMATION

1. Permanent residence of Insured: Yes No If no, how often does the insured occupy these premises? _____

2. Protection Class: _____

3. Distance to fire hydrant: _____ If none, what is the water source available? _____

4. Distance to fire station: _____ 5. Phone in the dwelling? Yes No

COVERAGES

COVERING:	COVERAGE (Circle One)	LIMIT
A.1 Dwelling: Primary or Secondary	Basic Form Or Broad Form	\$ ACV RCV
A.2 Other Dwellings	Basic Form	\$ ACV ONLY
B. Other Private Structures:		\$ 10% of A
C. Personal Property: Household Personal Prop.	Basic Form Or Broad Form	\$ ACV RCV
D. Loss of Use:		\$ 10% of A
E. Sched. Pers. Prop:	Basic Form	\$
F. Unsched. Pers. Prop:	Basic Form	\$
G. Sched. Farm Bldg:	Basic Form	\$
H. Liability Limit:		\$

80% Coinsurance ACV = Actual Cash Value

DWELLING - A.1

RCV = Replacement Cost Value

- | | |
|---|--|
| <p>1. Year Built? _____</p> <p>2. Construction _____ Type Roof? _____</p> <p>3. Roof replaced? Yes No # of layers _____ When _____</p> <p>4. Wiring replaced? Yes No _____ When _____</p> <p style="padding-left: 20px;">Aluminum wiring? Yes No If yes Pigtailed? _____</p> <p>5. Plumbing replaced? Yes No _____ When _____</p> <p>6. Is dwelling a mobile home or portable bldg? Yes No</p> <p style="padding-left: 20px;">Tied Down & Skirted? Yes No</p> <p style="padding-left: 20px;">Permanent foundation? Yes No</p> | <p>7. Is dwelling on all weather road? Yes No</p> <p>8. Is dwelling within 1/4 mile of another dwelling? Yes No</p> <p>9. Swimming pool on premises? Yes No</p> <p>10. Pool fenced? Yes No</p> <p>11. Protective Devices: (Check Those That Apply)</p> <p style="padding-left: 20px;">A. Central Station: Fire _____ Burglary Alarm(s) _____</p> <p style="padding-left: 20px;">B. Fire _____ Police Station Alarm (s) _____</p> <p style="padding-left: 20px;">C. Local Alarm _____ D. Sprinkler System _____</p> <p>12. Square Footage _____</p> |
|---|--|

OTHER DWELLINGS – A.2 (For multiple dwellings, use separate sheet)

- | | |
|---|---|
| <p>1. Year Built? _____</p> <p>2. Construction _____ Type Roof? _____</p> <p>3. Roof replaced? Yes No # of layers _____ When _____</p> <p>4. Wiring replaced? Yes No _____ When _____</p> <p style="padding-left: 20px;">Aluminum wiring? Yes No If yes Pigtailed? _____</p> <p>5. Plumbing replaced? Yes No _____ When _____</p> <p>6. Is dwelling a mobile home or portable bldg? Yes No</p> <p style="padding-left: 20px;">Tied Down & Skirted? Yes No</p> <p style="padding-left: 20px;">Permanent foundation? Yes No</p> <p>7. Is dwelling on all weather road? Yes No</p> | <p>8. Is dwelling within 1/4 mile of another dwelling? Yes No</p> <p>9. Swimming pool on premises? Yes No</p> <p>10. Pool fenced? Yes No</p> <p>11. Protective Devices: (Check Those That Apply)</p> <p style="padding-left: 20px;">A. Central Station: Fire _____ Burglary Alarm(s) _____</p> <p style="padding-left: 20px;">B. Fire _____ Police Station Alarm (s) _____</p> <p style="padding-left: 20px;">C. Local Alarm _____ D. Sprinkler System _____</p> <p>12. Square Footage _____</p> <p>13. Employee of Insured? Yes No</p> |
|---|---|

UNDERWRITING INFORMATION

Type of Farm/Ranch Operation	Number of Employees	Condition of Fencing
Field crops _____ number of acres	_____ Full-time	Excellent
Horses _____ number of head	_____ Part-time	Average
Dairy _____ number of head	_____ Seasonal	Poor
Livestock _____ number of head	_____ None	None
Swine _____ number of head		

SCHEDULED FARM BUILDINGS (G)

Item No.	Amount Of Coverage	Usage/Description	Size	Construction	Age
1					
2					
3					
4					
5					

LIST ALL BUILDINGS TO BE INSURED FOR PROPERTY COVERAGE. (Attach a separate sheet if necessary)

SCHEDULED PERSONAL PROPERTY (E)

Item No.	Year	Brand	Description	Serial No.	Limit
1					
2					
3					
4					
5					

(Attach a separate sheet if necessary)

22. Any hay rides or other type activities conducted on the premises? Yes No
23. Any unrepaired damage to any of the bldg(s).? Yes No If so , specify which bldg(s) & type of damage: _____
-
24. Has anyone with a financial interest in this property been convicted for arson, fraud, or other crimes related to loss on property owned now or during the last 5 years? Yes No
25. Has the insured ever filed bankruptcy? Yes No
26. Please list ALL buildings located on property that are **NOT** to be covered for property or liability.

Description of building	Construction	Size (for barns, sheds, etc)
_____	_____	_____
_____	_____	_____
_____	_____	_____

DECLARATIONS OF THE INSURED:

1. The above premises of the described dwelling are the only premises where the named Insured or spouse maintains a residence. If not, explain in remarks.

I acknowledge and warrant that the information given in this application, even if not in my handwriting, is true and correct to the best of my knowledge and belief. Any misrepresentation of facts material to insurability will render this policy null and void with no coverage afforded thereunder.

SPECIAL NOTICE: As part of our underwriting procedure, a routine inquiry and/or a consumer credit report may be made which will provide applicable information concerning character, general reputation, personal characteristics and mode of living. Upon written request, additional information, as the nature and scope of the report, if one is made will be provided.

The application must be fully complete, signed and dated by the insured or it will not be accepted by the underwriters.

No binding authority is extended to our agents and is reserved solely for the company underwriter.

_____ DATE This Application must be signed and dated by the producer.	_____ INSURED'S SIGNATURE
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_____ DATE Agency Name _____ Address _____ Phone _____	_____ PRODUCERS SIGNATURE Email _____ City _____ State _____ Fax _____
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How would you like policy? Emailed or Hard copy mailed (circle one)
PRODUCER WARRANTIES

Have you personally (or your agency representative) inspected this risk during the past 60 days?	Yes	No
Do you recommend this risk from the standpoint of pride of ownership and state of repair?	Yes	No

REMARKS: _____

FARM POLICY RESTRICTION (04/05) Revised

THIS POLICY CONTAINS THE FOLLOWING MAJOR LIMITATIONS OR EXCLUSIONS. PLEASE READ THEM CAREFULLY.

1. Premium is 25% fully earned.
2. This policy does not cover transmission of communicable diseases, assault and/or battery, punitive or exemplary damages, pollution or lead contamination.
3. This policy does not cover mysterious disappearances or theft, but does cover burglary for 10% of contents, this is maximum coverage allowed.
4. Art, Jewelry, Gems, Watches, Furs, Stamps, Monies, Coins, Bullion, Guns, Business Property, Boats or Motors are not covered unless scheduled hereunder and a premium paid therefore.
5. No coverage is provided by this policy for the insured's property away from the insured's premises unless scheduled hereunder. No coverage is provided for items left in an unattended car, truck or trailer.
6. Roofs in worn out condition or older than the normal life expectancy of a standard roof are not insured for hail and/or wind damages. Also, no coverage is afforded for the removal of multiple layers of roofing in the event of a covered loss.
7. Swimming pools/hot tubs/spas must be fenced and comply with all local ordinances.
8. Premises vacant or unoccupied over 20 days are not covered.
9. This policy does not cover the described premises in the event of change of ownership or tenant occupancy.
10. The coverage under this policy does not apply to "bodily injury", "property damage", "personal injury", "advertising injury", or any injury, loss or damage arising out of or caused by an animal or reptile, regardless whether owned by you, in your care, or on your premises. This exclusion does not apply to livestock for which liability coverage has been purchased.
11. Notwithstanding any other provision in this policy, no coverage of any kind is afforded by this policy for any damage to insured property, whether caused directly or indirectly by a covered peril, resulting from rust, rot, mold or other fungi, spores, dust, contamination, deterioration, pollutants, asbestos, communicable disease, or infestation of rodents, insects or any other living organisms. Further, no liability coverage or legal defense will be provided for any third party bodily injury, property damage or medical payment claim resulting from or arising out of or alleged to have resulted from or arisen out of, any of such aforementioned conditions, as further defined in form MKG01, section i.
12. In consideration of the premium charged, no liability or property coverage is afforded by this policy for any claim/suit or damages arising out of and/or connected with and/or caused by and/or alleged to have been caused in whole or in part by the trampoline that is at the insured's residence.
13. We do not cover loss including loss of use caused by settling, cracking, bulging, shrinkage, or expansion of foundation, walls, floors, ceilings, roof structures, walks, drives, curbs, fences, retaining walls or swimming pools. In addition, we do not cover loss, including loss of use, caused by broken or leaking pipes in or under slab foundations for dwellings.
14. It is understood and agreed both by the insured and the insurer that no coverage for Bodily Injury or Property Damage is provided by this policy caused or alleged to be caused by diseased animals owned by the insured.
15. There is no coverage or defense provided for first or third party property damage, bodily injury, or liability claims caused by or attributed to fire and/or smoke emanating from or involving stacks of hay bales greater than 25 in number, or from **ANY** number of round bales of hay. No coverage is provided for hay in any form.
16. There is NO coverage or defense of first or third party property damage, bodily injury, or liability claims caused by or attributed to smoke or fire resulting from the use or storage of a barbecue grill of any type where said use or storage occurs less than 10 feet from any structure or under any roof.
17. Water damage coverage only applies if Broad Form coverage is given and not specifically excluded. In the event that Broad Form coverage is given there is no coverage provided for damage caused by or resulting from bursting, breaking, seeping or leaking pipes in or below the ground floor slab or if there is no slab, in or below the first floor surface. Water damage coverage is limited to \$5,000 unless additional coverage is purchased. This limit shall be the maximum amount payable, per occurrence, for a covered loss and includes the dwelling, contents and any additional living expense claimed. The stated policy deductible shall apply, and subject to policy restrictions
18. No coverage is provided by this policy for liability or physical damage for a All Terrain Vehicle (ATV).

THE APPLICATION MUST BE FULLY COMPLETED, SIGNED AND DATED BY THE INSURED OR IT WILL NOT BE ACCEPTED BY THE UNDERWRITERS.

*******NO BINDING AUTHORITY IS EXTENDED TO THE AGENT*******

SPECIAL NOTICE: As part of our underwriting procedure, a routine inquiry and/or a consumer credit report may be made which will provide applicable information concerning character, general reputation, personal characteristics and mode of living. Upon written request, additional information as to the nature and scope of the report, if one is made will be provided.

I acknowledge and warrant that the information given in this application even if not in my handwriting, is true and correct to the best of my knowledge and belief.

Date: _____ Insured's Signature: _____

****RESTRICTION PAGE IS VALID ON ORIGINAL POLICY AND ANY RENEWAL THEREOF.****