



COLONY INSURANCE COMPANY  
FARM & RANCH OWNERS PDQ  
SUPPLEMENTAL APPLICATION

\_\_\_\_\_  
**General Agent Name**

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Date: \_\_\_\_\_

Insured: \_\_\_\_\_

Location: \_\_\_\_\_

If there is no street address on ACORD application attach legal description of the property. Provide location of each farm premises.

**APPLICANT INFORMATION:**

Policy Period Desired: From \_\_\_\_\_ To \_\_\_\_\_

Business Trade Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_

County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Years in Business \_\_\_\_\_ Years Management Experience \_\_\_\_\_

Business Entity: Individual \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Type of Farm or Ranch \_\_\_\_\_

**UNDERWRITING INFORMATION:**

**Locations of Farming or Ranching Operations**

No. Location \_\_\_\_\_ Total Acreage \_\_\_\_\_ Buildings? Yes /

1] \_\_\_\_\_

2] \_\_\_\_\_

3] \_\_\_\_\_

**Building and Structures (Coverage A & G)**

Description Construction Age Condition Use or Occupancy Value in Dollars Additional Interest

Dwelling \_\_\_\_\_

Dwelling \_\_\_\_\_

Barn \_\_\_\_\_

Shed \_\_\_\_\_

Stable \_\_\_\_\_

**Unscheduled Farm Personal Property (Coverage F)**

## Scheduled Farm Personal Property

Description of Item	Quantity or ID Number	Value in Dollars	Additional Inter
Computer			
Feed and Seed			
Materials and Supplies			
Machinery and Equipment			

## Farm Products

What are your annual sales: Livestock \$ \_\_\_\_\_ Poultry \$ \_\_\_\_\_ Other Farm Products \$ \_\_\_\_\_

## GENERAL INFORMATION QUESTIONS

### Applicant

1. Does the agent know the applicant? Yes No; If "Yes", number of years: \_\_\_\_\_.
2. When did the agent last personally inspect the property? \_\_\_\_\_ Distance to nearest fire service?
3. What is the applicant's main source of income? \_\_\_\_\_
4. Who actually farms the premises? \_\_\_\_\_
5. Are any farms or ranches owned or controlled by the applicant not included for coverage? Yes No;  
If "Yes" explain below.

### Buildings

6. Is the dwelling(s) currently occupied? Yes No; If "Yes", by whom? \_\_\_\_\_
7. Are there auxiliary heating devices in any building? Yes No
8. Are any structures not being used as originally intended? Yes No; If "Yes", explain below.
9. Are any structures not located on an accessible road year-round? Yes No; If "Yes", explain below.
10. Are Swine or poultry brooders used? Yes No; If "Yes", in what buildings? \_\_\_\_\_

### Farm Operations

11. Are there any commercial businesses conducted on premises? Yes No; If "Yes", explain below.
12. Is the applicant involved in any farm management for others? Yes No; If "Yes", explain below.
13. Does the applicant conduct any farm operations on premises such as seed or feed sales, Christmas trees, fruit or vegetable stands, etc.? Yes No; If "Yes", explain below and answer questions 12 and 13. If "No", skip to
14. Are customers allowed to pick their own fruits or vegetables? Yes No; If "Yes", what kind? \_\_\_\_\_
15. Does the applicant operate a roadside stand on or off premises? Yes No; If "Yes", explain below.
16. Does the applicant do any farm work or custom farming for others? Yes No; If "Yes", explain below.
17. Does the applicant apply anhydrous ammonia to his farm? Yes No; To farms of others? Yes No;  
If "Yes", explain below.
18. Does the applicant apply herbicides or pesticide for others? Yes No; If "Yes", explain below.
19. Has the applicant ever had any complaints regarding pollution, overspray, waste run-off or similar damages?  
Yes No; If "Yes", explain below.

### Livestock

20. Does the applicant raise livestock of any kind? Yes No; If "Yes", explain below.
21. Does the applicant have any involvement with horses? Yes No; If "Yes", indicate how many, check box (es) that apply, and explain below.  
Boarding for hire                      Horses for rent                      Personal ownership  
Training for hire                      Riding instruction                      Showing/Racing
22. Describe the condition of applicant's fences? Excellent Good Fair Poor
23. Is there any custom feeding of livestock for others on premises? Yes No; If "Yes", how many head?

**Other Operations**

- 24. Does the applicant own any Aircraft or Watercraft? Yes No; If "Yes", If "Yes", explain below.
- 25. Are the premises used for any of the following activities? Swimming or boating? Yes No; Hunting or Fishing? Yes No; Hiking? Yes No; Trail rides? Yes No; Camping /picnicking? Yes No. If "Yes" to any of the previous exposures, describe and explain below.

**Explanation:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Prior Carrier and Loss History for 3 Years**

Current Carrier _____	Policy Period _____	Policy Premium _____
Prior Carrier _____	Policy Period _____	Policy Premium _____
Prior Carrier _____	Policy Period _____	Policy Premium _____

<u>Date of Loss</u>	<u>Amount of Loss</u>	<u>Description of Loss</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**COVERAGE REQUESTED:**

A-Dwelling(s) _____	Limit \$ _____	Causes of Loss: Basic Broad Special
B-Private Structures	10% of A	Causes of Loss: Basic Broad Special
C-Household Personal Property	50% of A	Causes of Loss: Basic Broad Special
D-Loss of Use	20% of A	
E-Scheduled Farm Personal Property	(See Schedule)	Causes of Loss: Basic Broad
F-Unscheduled Farm Personal Property	Limit \$ _____	Causes of Loss: Basic Broad
G-Other Farm Structures	(See Schedule)	Causes of Loss: Basic
H-Bodily Injury & Property Damage Liability	Limit \$ _____ per Occurrence with, \$ _____ General Aggregate	
I-Personal Injury Limit \$ _____	per Occurrence	
J-Medical Payments	\$5,000	

Optional Livestock Collision: (Schedule E) Number of Animals \_\_\_\_\_ Limit per Animal \$ \_\_\_\_\_

**I understand that misrepresentation or omission of material facts will be cause for cancellation and may void coverage.**

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

**Agency Name and Agent's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_