

LOSS HISTORY - NEW BUSINESS Check Here if None See Attached Loss Summary * Please provide hard copy loss runs for a minimum of the previous three years

Date of Occurrence	Line	Type/Description of Occurrence or Claim	Date of Claim	Amount Paid	Amount Reserved	Claim Status
						Open
						Closed
						Open
						Closed

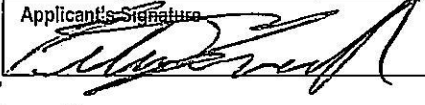
Have you been (Not Applicable in Missouri): Canceled Non-Renewed Declined None of the above Please explain:

Inspection Contact	PHONE (A/C, NO, Ext):	Accounting Records Contact	Accounting Records Contact (A/C, NO, Ext):
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COPY OF THE NOTICE OF INFORMATION PRACTICES (PRIVACY) HAS BEEN GIVEN TO THE APPLICANT. (Not applicable in all states. Consult your agent or broker for your state's requirements.)

NOTICE OF INSURANCE INFORMATION PRACTICES Personal information about you, including information from a credit report, may be collected from persons other than you in connection with this application for insurance and subsequent policy renewals. Such information as well as other personal and privileged information collected by us or our agents may in certain circumstances be disclosed to third parties without your authorization. You have the right to review your personal information in our files and can request correction of any inaccuracies. A more detailed description of your right and our practices regarding such information is available upon request. Contact your agent or broker for instructions on how to submit a request to us.


The undersigned is an authorized representative of the applicant and represents that reasonable inquiry has been made to obtain the answers to questions on this application. He/she represents that the answers are true, correct, and complete to the best of his/her knowledge.

Applicant's Signature 	Date 7/16/19	Agent's Signature	Date
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- Key**
- 1: Available Inflation Guard %: 4, 6, 8, 10
 - 2: Perils: B=Basic BR=Broad S=Special S/BR=Special/Broad
 - 3: Protective Devices SD = smoke detector; BR-1 = Premises Burglar Alarm; BR-3 = Security Service P1 = Automatic Sprinkler System; P2 = Automatic Fire Alarm; P3 = Watchman/Security Services; P4 = Privately Owned Fire Department
 - 4: Valuation Coverage A: RC=Replacement Cost; ERC=Extended Replacement Cost; ACV=Actual Cash Value; FBV=Functional Building Valuation.
 - 5: Valuation Coverage C: RC=Replacement Cost; ACV=Actual Cash Value
 - 6: A. Certain causes of loss are excluded with respect to buildings or structures vacant more than 30 consecutive days. Use 'Waiver of Vacancy' to extend coverage beyond 30 days.
B. A loss condition reduces the applicable Limit of Insurance by 50% if a building or structure is unoccupied or vacant more than 120 consecutive days. Use 'Waiver of Unoccupancy and Vacancy' to waive the Unoccupancy and Vacancy Loss Condition for periods of vacancy and unoccupancy beyond 120 days.
 - 7: Does not apply to Livestock or Machinery
 - 8: Type: 1. Jewelry, 2. Furs, 3. Cameras, 4. Musical Instruments, 5. Silverware, 6. Fine Arts, 7. Golf Equipment, 8. Stamps, 9. Coins, 10. Firearms, 11. Other
 - 9: Valuation Coverage G: RC=Replacement Cost; ACV=Actual Cash Value; FBV=Functional Building Valuation.
 - 10: Valuation Coverage E: RC=Replacement Cost; ACV=Actual Cash Value; F=Functional; WMV=Wine Market Value.

<input checked="" type="checkbox"/> Check if not applicable		
Hay/Sleigh Rides, Rentals and Pack Trips		
Refer to underwriting if applicable.		
1. Do you have hayrides?	If so, how many annually?	How many passengers per ride?
2. Do you have sleigh rides?	If so, how many annually?	How many passengers per ride?
3. Total number of wagons/sleds/carts/carriages/buggies, etc.		
4. Total number of horses available for rental at peak season.		
5. Do you offer pack trips? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain in remarks.		
Remarks		

Non-owned horses in your care, custody or control are not covered for injury or death by this policy unless endorsed.

Signature of Agent	Signature of Insured/Applicant 
Name of Agency	Title of Insured/Applicant