

## Livestock Auction Market Insurance Coverage Application

This is not a binder. No Application will be considered if not fully completed and signed by the insured.

Desired Effective Date:

Primary Contact:

Applicant's Name (as it should appear on the policy):

Address:

City, State, Zip:

Phone Number:

Email Address:

**Deductible requested** (only available with copy of tariff showing no insurance is charged to consignor):

<b>COVERAGE REQUESTED:</b>	Premises	Transit	Mortgaged & Stolen Liability
<b>LIMITS REQUESTED:</b>			
Policy Maximum:		Transit:	(\$100,000 standard)
Carcass Disposal:	(\$10,000 standard)	Per Head:	(\$5,000 standard)
Mortgaged or Stolen (if applicable):			(\$1,000,000 standard)

**Reporting option requested:**

(annual, quarterly, monthly)

Is the applicant domiciled in the United States of America? YES NO

Has the applicant ever been convicted of a felony? YES NO

Has any company cancelled or refused to offer coverage to the applicant? YES NO

If YES, please explain:

Is this risk currently insured? YES NO

If YES, with whom?

Please explain if applicant owns, operates, or has financial interest in any other livestock operations:

Name and address of additional insured/loss payee (if applicable):

Are there any animals sold at this market with values exceeding normal slaughter or stocker market values? If YES, please describe: YES NO

Will any animals remain on applicant's premises for more than 30 days after arrival? YES NO

Does applicant transport any animals for hire? YES NO

What percentage of animals will be under roof vs open lots/pens? %

Are employees on duty and present at all times when livestock are present? YES NO

Will entrance gates be locked when no one is present? YES NO

Distance to nearest fire department:

**Please specify all methods of livestock marketing:**

Auction	Order Buying	Private Treaty	Online Sales	Procurement/Purchasing
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Weekly sale schedule (auctions only):

Please list any seasonal or annual special sales:

Average number of animals sold/purchased weekly:

Cattle	Sheep	Hogs	Horses	Other
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Maximum value per animal type sold/purchased:

Cattle	Sheep	Hogs	Horses	Other
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**GROSS SALES/PURCHASES AND LOSS HISTORY:**

Year (minimum 3 years, 5 years preferred)	Gross Livestock Sales/Purchases (in US Dollars)	Total Livestock Losses/Claims (In US dollars)

**PLEASE ANSWER THE FOLLOWING IF APPLYING FOR MORTGAGED OR STOLEN ENDORSEMENT:**

Please indicate if applicant receives animals from any of the following states:

- |              |          |              |               |            |           |             |
|--------------|----------|--------------|---------------|------------|-----------|-------------|
| Alabama      | Colorado | Idaho        | Louisiana     | Maine      | Minnesota | Mississippi |
| Montana      | Nebraska | North Dakota | New Hampshire | New Mexico | Oklahoma  | Oregon      |
| South Dakota | Utah     | Vermont      | West Virginia | Wyoming    |           |             |

Has applicant registered with the Central Filing System of such state(s), and does applicant regularly receive notices of livestock liens? YES    NO

If no, please explain:

Please explain office procedures to properly process the notice of liens and verify clear title for livestock:

**LOCATION INFORMATION (if applicable):**

Address or Legal Description; City & State	Zip Code	Capacity (#of Head)	Year Built or Renovated	Construction Description (wood frame/steel frame)

I understand that it is required under the policy to do the following in the event of a loss, and that not doing so may jeopardize coverage and result in denial of any claim made, and will review the policy upon receipt for all terms and conditions:

- Give immediate notice by telephone of any loss.
- Do not remove dead livestock until authorized by us, unless legal required to do so.
- Not agreed to any terms or value for salvage until authorized by us.

**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 hereto, commits a fraudulent act, which is a crime and may subject such persons to criminal and civil penalties.**

I declare to the best of my knowledge and belief that the animal(s) listed on the above application to be in normal healthy sound condition. I hereby certify that the above information is truthful and accurate. I understand that any fraudulent, omitted, or misrepresented statement voids any policy of insurance issued on the basis of this application. I further understand that the insurer will rely on the information provided in this application, which will become part of any policy issued.

I understand and agree this is not a binder, but merely an application of insurance.

Signature of Applicant:

Date:

#### FRAUD NOTICE - GENERAL WARNING

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

#### STATE SPECIFIC PROVISIONS

<b>Arkansas</b>	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.
<b>Colorado</b>	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 policy holder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable for insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.
<b>District of Columbia</b>	WARNING: It is a crime to provide false or misleading information to an insured for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

<b>Florida</b>	Any person who knowingly and with intent to injure, defraud or deceive any insurance company files a statement of claim containing any false, incomplete, or misleading information is guilty of a felony of the third degree.
<b>Hawaii</b>	For your protection, Hawaii law requires you to be informed that presenting a fraudulent claim for payment of a loss or benefits is a crime punishable by fines or imprisonment, or both.
<b>Kentucky</b>	Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance 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.
<b>Louisiana</b>	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.
<b>Maine</b>	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 or denial of insurance benefits.
<b>Maryland</b>	Any person who knowingly and willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly and willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.
<b>New Jersey</b>	Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.
<b>New Mexico</b>	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to civil fines and criminal penalties.
<b>New York</b>	<p><b>All commercial insurance forms, except as provided for automobile insurance:</b> 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 shall also be subject to civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.</p> <p><b>Fire insurance:</b> Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any false information, or concealed for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. The proposed insured affirms that the foregoing information is true and agrees that these applications shall constitute a part of any policy issued whether attached or not and that any willful concealment or misrepresentation of a material fact or circumstance shall be grounds to rescind the insurance policy.</p>
<b>Ohio</b>	Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.
<b>Oklahoma</b>	<b>WARNING:</b> Any person who knowingly and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete, or misleading information is guilty of a felony.

<b>Oregon</b>	Any person who, with INTENT TO DEFRAUD or knowing that he is facilitating a fraud against an insurer, submits an application, or files a claim containing a false or deceptive statement MAY BE guilty of insurance fraud. (In this statement the “intent” and “may be guilty” could make it acceptable even though the “false or deceptive statement” is not identified as material.)
<b>Pennsylvania</b>	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.
<b>Puerto Rico</b>	Any person who knowingly and with the intention to defraud includes false information in an application for insurance or file, assists or abet in the filing of a fraudulent claim to obtain payment of a loss or other benefit, or files more than one claim for the same loss or damage, commits a felony and if found guilty shall be punished for each violation with a fine of no less than five thousand dollar (\$5,000), not to exceed ten thousand dollars (\$10,000); or imprisonment for the fixed jail term of three (3) years, or both. If aggravating circumstances exist, the fixed jail term may be increased to a maximum of five (5) years; and if mitigating circumstances are presented, the jail term may be reduced to a minimum of two (2) years.
<b>Rhode Island</b>	<b>Property Insurance, Real or Personal:</b> The insurance application form shall indicate the existence of a criminal penalty for failure to disclose a conviction of arson.
<b>Tennessee</b>	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, or denial of insurance benefits.
<b>Virginia</b>	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, or denial of insurance benefits.
<b>West Virginia</b>	Any person knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

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