



## Farm/Ranch Insurance Quote Information

Full Name: \_\_\_\_\_  
Farm Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Property Address (If different): \_\_\_\_\_  
\_\_\_\_\_

Home Ph: \_\_\_\_\_ Cell: \_\_\_\_\_  
Work Ph: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_  
Website: \_\_\_\_\_

Name of Closest Fire Depart: \_\_\_\_\_ Distance From Property: \_\_\_\_\_  
Is there a fire hydrant within 1000 ft of property? YES NO

County Property is In: \_\_\_\_\_ # of Acres: \_\_\_\_\_

### DWELLINGS:

#### 1) Main Dwelling:

Year Built: \_\_\_\_\_ Year Updated and Updates: \_\_\_\_\_  
Square Footage: \_\_\_\_\_ Est. Replacement Cost: \_\_\_\_\_  
Type of Exterior Construction: \_\_\_\_\_ Type of Roof: \_\_\_\_\_  
Age of Roof: \_\_\_\_\_  
Type of Heating System: \_\_\_\_\_ Age of Heating System: \_\_\_\_\_  
Type of Cooling System: \_\_\_\_\_ Age of Cooling System: \_\_\_\_\_  
Is there a Central Station Alarm? \_\_\_\_\_ or Local Alarm? \_\_\_\_\_  
Are there Smoke Alarms? \_\_\_\_\_ Wired or Battery: \_\_\_\_\_

#### 1) Other Dwelling:

Year Built: \_\_\_\_\_ Year Updated and Updates: \_\_\_\_\_  
Square Footage: \_\_\_\_\_ Est. Replacement Cost: \_\_\_\_\_  
Type of Exterior Construction: \_\_\_\_\_ Type of Roof: \_\_\_\_\_  
Age of Roof: \_\_\_\_\_  
Type of Heating System: \_\_\_\_\_ Age of Heating System: \_\_\_\_\_  
Type of Cooling System: \_\_\_\_\_ Age of Cooling System: \_\_\_\_\_  
Is there a Central Station Alarm? \_\_\_\_\_ or Local Alarm? \_\_\_\_\_  
Are there Smoke Alarms? \_\_\_\_\_ Wired or Battery: \_\_\_\_\_

If any dwelling is over 25 years old, please indicate when plumbing, heating/AC and wiring... Year and what was updated: \_\_\_\_\_  
 \_\_\_\_\_

Is there a Mortgage on Property? \_\_\_\_\_

Mortgage Company: \_\_\_\_\_

Is your Premium Paid through your Mortgage Escrow? \_\_\_\_\_ or Self? \_\_\_\_\_

### FARM BUILDINGS:

Building #1: Use: \_\_\_\_\_ Year Built: \_\_\_\_\_  
 Square Footage: \_\_\_\_\_ Est. Replacement Cost \$: \_\_\_\_\_  
 Exterior Construction: \_\_\_\_\_ Wood Trusses or Steel Trusses: \_\_\_\_\_  
 Roof Material: \_\_\_\_\_ Age of Roof: \_\_\_\_\_  
 Smoke Alarm: \_\_\_\_\_ Wired or Battery: \_\_\_\_\_ Lightning Rods: \_\_\_\_\_  
 Fully Enclosed: \_\_\_\_\_ Any Improvements/ Yr? \_\_\_\_\_  
 # of Stalls: \_\_\_\_\_ Size of Stalls: \_\_\_\_\_

Building #2: Use: \_\_\_\_\_ Year Built: \_\_\_\_\_  
 Square Footage: \_\_\_\_\_ Est. Replacement Cost \$: \_\_\_\_\_  
 Exterior Construction: \_\_\_\_\_ Wood Trusses or Steel Trusses: \_\_\_\_\_  
 Roof Material: \_\_\_\_\_ Age of Roof: \_\_\_\_\_  
 Smoke Alarm: \_\_\_\_\_ Wired or Battery: \_\_\_\_\_ Lightning Rods: \_\_\_\_\_  
 Fully Enclosed: \_\_\_\_\_ Any Improvements/ Yr? \_\_\_\_\_  
 # of Stalls: \_\_\_\_\_ Size of Stalls: \_\_\_\_\_

Building #3: Use: \_\_\_\_\_ Year Built: \_\_\_\_\_  
 Square Footage: \_\_\_\_\_ Est. Replacement Cost \$: \_\_\_\_\_  
 Exterior Construction: \_\_\_\_\_ Wood Trusses or Steel Trusses: \_\_\_\_\_  
 Roof Material: \_\_\_\_\_ Age of Roof: \_\_\_\_\_  
 Smoke Alarm: \_\_\_\_\_ Wired or Battery: \_\_\_\_\_ Lightning Rods: \_\_\_\_\_  
 Fully Enclosed: \_\_\_\_\_ Any Improvements/ Yr? \_\_\_\_\_  
 # of Stalls: \_\_\_\_\_ Size of Stalls: \_\_\_\_\_

Building #4: Use: \_\_\_\_\_ Year Built: \_\_\_\_\_  
 Square Footage: \_\_\_\_\_ Est. Replacement Cost \$: \_\_\_\_\_  
 Exterior Construction: \_\_\_\_\_ Wood Trusses or Steel Trusses: \_\_\_\_\_  
 Roof Material: \_\_\_\_\_ Age of Roof: \_\_\_\_\_  
 Smoke Alarm: \_\_\_\_\_ Wired or Battery: \_\_\_\_\_ Lightning Rods: \_\_\_\_\_  
 Fully Enclosed: \_\_\_\_\_ Any Improvements/ Yr? \_\_\_\_\_  
 # of Stalls: \_\_\_\_\_ Size of Stalls: \_\_\_\_\_

Building #5: Use: \_\_\_\_\_ Year Built: \_\_\_\_\_  
 Square Footage: \_\_\_\_\_ Est. Replacement Cost \$: \_\_\_\_\_  
 Exterior Construction: \_\_\_\_\_ Wood Trusses or Steel Trusses: \_\_\_\_\_  
 Roof Material: \_\_\_\_\_ Age of Roof: \_\_\_\_\_  
 Smoke Alarm: \_\_\_\_\_ Wired or Battery: \_\_\_\_\_ Lightning Rods: \_\_\_\_\_  
 Fully Enclosed: \_\_\_\_\_ Any Improvements/ Yr? \_\_\_\_\_  
 # of Stalls: \_\_\_\_\_ Size of Stalls: \_\_\_\_\_

(please copy this page if there are additional buildings to list)

### QUESTIONS:

Have you had any claims or losses in the past three years? \_\_\_\_\_  
 Describe losses with date, type of claim, and approximate amount paid: \_\_\_\_\_  
 \_\_\_\_\_

Do you operate any other type of business from your farm property? \_\_\_\_\_  
 Brief Description: \_\_\_\_\_

Do you own or operate any additional farm properties, or own a seasonal property such as a vacation home? \_\_\_\_\_

Do you have: Swimming Pool: \_\_\_\_\_ Enclosed by a Fence: \_\_\_\_\_  
 Diving Board: \_\_\_\_\_ Slide: \_\_\_\_\_  
 Trampoline: \_\_\_\_\_

Do you have: Dogs: \_\_\_\_\_ # and Type: \_\_\_\_\_

Personal Items: Do you have any personal items to schedule? (jewelry, guns, coins, anything of high value). Please attach a list with description, current value.  
 \_\_\_\_\_

Farm Machinery and Equipment: Make, Model, Value:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Tack and Equipment Value: \$ \_\_\_\_\_

**HORSE OPERATION:**

- 1) How many horses do you Personally Own/Lease? \_\_\_\_\_  
 Indicate #/Use:  
 Show/Pleasure: \_\_\_\_\_ How many taken off premise at one time? \_\_\_\_\_  
 Breeding: Stallions: \_\_\_\_\_ Stud Fee: \_\_\_\_\_ Mares: \_\_\_\_\_  
 Foals / Yearlings: \_\_\_\_\_  
 Lesson Horses: \_\_\_\_\_ How many taken off premise at one time? \_\_\_\_\_  
 Other: \_\_\_\_\_  
 Types of Horses/ Uses: \_\_\_\_\_
- 2) How many NON-OWNED horses are normally on your property: \_\_\_\_\_  
 Indicate # of each:  
 Boarding: \_\_\_\_\_ Normal Monthly Boarding Charge: \_\_\_\_\_  
 Training: \_\_\_\_\_ Normal Monthly Training Charge: \_\_\_\_\_  
 Breeding: \_\_\_\_\_ Typical annual breeding receipts: \_\_\_\_\_  
 Other: \_\_\_\_\_
- 3) Non-Owned Horse Values: (of horses on your property)  
 Minimum Value: \_\_\_\_\_ Average Value: \_\_\_\_\_ Maximum Value: \_\_\_\_\_
- 4) Where are horses kept at night? Barn or pasture: \_\_\_\_\_
- 5) What type of Fencing do you have: \_\_\_\_\_
- 4) How many years experience do you have caring for horses: \_\_\_\_\_

**LESSONS / CLINICS / DAY CAMPS / HORSE OPERATION ACTIVITIES:**

- 1) Do you give Riding Lessons? \_\_\_\_\_ # per week: \_\_\_\_\_ Charge/Lesson \$ \_\_\_\_\_  
 # of lessons on Client's horses per week: \_\_\_\_\_  
 # of lessons on school horses per week: \_\_\_\_\_  
 Who Gives Lessons: Self: \_\_\_\_\_ How many years experience teaching: \_\_\_\_\_  
 Independent Instructor: Names: \_\_\_\_\_  
 Does Ind. Instructor have their own insurance? \_\_\_\_\_  
 Lessons: English: \_\_\_\_\_ Western: \_\_\_\_\_ Jumping: \_\_\_\_\_ other: \_\_\_\_\_
- 2) Do you hold Clinics on you property: \_\_\_\_\_ How Many: \_\_\_\_\_  
 Average # of participants: \_\_\_\_\_ # Spectators: \_\_\_\_\_  
 Gross Receipts:\$ \_\_\_\_\_
- 3) Do you have Day Camps: \_\_\_\_\_ # of Days: \_\_\_\_\_ Minimum Age: \_\_\_\_\_  
 Describe Activities: \_\_\_\_\_  
 Gross Receipts: \$ \_\_\_\_\_

- 4) Do you have Horse Shows: \_\_\_\_\_ # of Days: \_\_\_\_\_  
 Avg # Participants: \_\_\_\_\_ # Spectators: \_\_\_\_\_  
 Gross Reciepts:\$ \_\_\_\_\_  
 Concession Stand? \_\_\_\_\_ Gross Reciepts \$ \_\_\_\_\_
  
- 5) Do you Sell Horses? \_\_\_\_\_ # per year: \_\_\_\_\_ Gross Receipts: \_\_\_\_\_
  
- 6) Do you Sell Tack and Clothing? \_\_\_\_\_ Gross Receipts: \_\_\_\_\_
  
- 7) Do you Trailer horses for other people? \_\_\_\_\_ # Horses per Trip: \_\_\_\_\_  
 Mileage Radius Per Trip: \_\_\_\_\_ Average # Trips Per Year: \_\_\_\_\_  
 Trailer: (Type and capacity): \_\_\_\_\_
  
- 8) Are there any other equine activities on your property not mentioned above:  
 (pony parties, etc) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  
- 9) How many years experience do have owning horses: \_\_\_\_\_

**EMPLOYEES:**

How many employees do you have? \_\_\_\_\_  
 Full Time: \_\_\_\_\_ Annual Payroll: \_\_\_\_\_  
 Part Time: \_\_\_\_\_ Annual Payroll: \_\_\_\_\_

**CURRENT INSURANCE** with: \_\_\_\_\_  
 Renewal Date: \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Please fax back to 336-940-5475, or sign, scan and email.*