

GENERAL INFORMATION (Explain all YES responses)

	Yes	No		Yes	No
1. Are independent contractors hired to perform any farming operations?	<input type="checkbox"/>	<input type="checkbox"/>	12. Does insured board, race, breed or rent horses? If yes, A. Please explain operations _____	<input type="checkbox"/>	<input type="checkbox"/>
			B. Does insured have coverage for this elsewhere If yes, please provide company name: _____	<input type="checkbox"/>	<input type="checkbox"/>
2. Does applicant mix, process, slaughter, butcher or otherwise prepare for an "end consumer" his or any other grower's product?	<input type="checkbox"/>	<input type="checkbox"/>	13. Is any land held for real estate development or speculation?	<input type="checkbox"/>	<input type="checkbox"/>
3. Does applicant handle any product, such as seed, fertilizer, sprays, etc. for resale?	<input type="checkbox"/>	<input type="checkbox"/>	14. Does applicant maintain any vacation or seasonal premises?	<input type="checkbox"/>	<input type="checkbox"/>
4. Are any contract or service operations performed for others such as snow removal, tilling, excavating or ditching?	<input type="checkbox"/>	<input type="checkbox"/>	15. Are there any milking operations being performed? If yes, A. Number of cows/goats milked _____ B. Are there any retail sales of milk products to the public? If yes, Please provide amount of receipts _____	<input type="checkbox"/>	<input type="checkbox"/>
5. Does the insured attend farmer's markets? If yes, please list locations _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	16. Are any premises used for hunting purposes? A. By owners? <input type="checkbox"/> B. By others for a fee? <input type="checkbox"/> If yes, fee amount _____	<input type="checkbox"/>	<input type="checkbox"/>
6. Are the farm premises open to the public for activities such as roadside stands, "u-pick", recreational, "rent a garden", auction, sales, show, food or beverage service, hay rides, fishing, kennels, animal boarding, or Christmas tree sales uses? *If yes, please complete agritainment questionnaire.	<input type="checkbox"/>	<input type="checkbox"/>	17. Does applicant maintain a non-farm office or private school in an insured building?	<input type="checkbox"/>	<input type="checkbox"/>
7. Are any portions of the farm or farm buildings rented, leased or used by any other individual, corporation or interest for other than farming?	<input type="checkbox"/>	<input type="checkbox"/>	18. Is there a swimming pool on premises? Is it fenced? <input type="checkbox"/> Is there a diving board? <input type="checkbox"/> If yes, depth _____	<input type="checkbox"/>	<input type="checkbox"/>
8. Is there any unusual hazard such as (but not limited to) open dump pits, silage pits, sump holes, ponds, lakes or reservoirs?	<input type="checkbox"/>	<input type="checkbox"/>	19. Does applicant serve on any other Boards for remuneration?	<input type="checkbox"/>	<input type="checkbox"/>
9. Are any "hold harmless" or "indemnifying" agreements in effect?	<input type="checkbox"/>	<input type="checkbox"/>	20. Does applicant have any potentially dangerous animals or exotic pets?	<input type="checkbox"/>	<input type="checkbox"/>
10. Are there any livestock kept on any location listed on this policy? If yes, A. Are all areas adequately fenced? <input type="checkbox"/> B. Are fences in a good state of repair? <input type="checkbox"/> If no, for either of above please explain _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	21. Is there any watercraft or snowmobile exposure?	<input type="checkbox"/>	<input type="checkbox"/>
11. Any non-owned horses on any insured premises?	<input type="checkbox"/>	<input type="checkbox"/>			

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| <p>22. Is there a supplemental heating source in any dwelling/building (fireplace, wood or coal stove, space heater)? <input type="checkbox"/> <input type="checkbox"/></p> <p>*If yes, provide woodburning questionnaire.</p> | <p>24. Are any renewable energy sources, such as solar panels or wind turbines, located on the farm premises? <input type="checkbox"/> <input type="checkbox"/></p> <p>(Please note: there is no binding authority for this coverage)
*If yes, provide renewable energy questionnaire.</p> |
| <p>23. Does the insured have other business with BMIC? <input type="checkbox"/> <input type="checkbox"/></p> <p>If yes, provide policy number _____</p> | <p>25. Has the insured had any policy cancelled or non-renewed in the past five years? <input type="checkbox"/> <input type="checkbox"/></p> <p>If yes, please explain _____</p> <p>_____</p> <p>_____</p> |

FRAUD STATEMENT

Applicable in DE: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, files a statement of claim containing any false, incomplete, or misleading information is guilty of a felony.

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

Applicable in PA: 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.

Applicable in VA: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits.

Insured's Signature _____ **Producer's Signature** _____