



# AGRICULTURE ENVIRONMENTAL INSURANCE APPLICATION

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**INSTRUCTIONS:** This application is to be used when applying for Pollution Liability insurance. Please complete all applicable sections of this application. Read all questions carefully and provide complete and accurate answers. Failure to provide complete or accurate information may result in delayed consideration of this application or denial of coverage. This application is not an insurance policy and the Company considering coverage reserves the right to reject any application for any reason. If additional space is needed, please attach details to this application on a separate piece of paper. All applicants must sign and date the application where indicated.

**NOTICE:** For certain policies and coverage parts issued, the limits of liability available to pay judgments for settlements shall be reduced by amounts incurred for legal defense. Further note that amounts incurred for legal defense shall be applied against the deductible or self-insured retention amount.

## I. APPLICANT INFORMATION

APPLICANT NAME:			DATE:			
ADDRESS:			PHONE:			
CITY:	STATE:	ZIP:	EMAIL:			
ENTITY IS:	Individual	Partnership	Corporation	Joint Venture	Other (Please Explain)	WEBSITE:

## II. REQUESTED COVERAGE

Site Pollution Liability	Contractor's Pollution Liability	On-Site Cleanup Coverage	Transportation Pollution Liability
Requested Effective Date:		Existing Retroactive Date:	
Requested Limits of Insurance:		Requested Deductible:	

## III. INSURED LOCATIONS *(If additional space is needed, please provide information in same format on separate pages and attach to this application)*

Insured Location	Total Acreage	Owned/Leased	Description of Operations
1.			
2.			
3.			
4.			
5.			

\* What are the nitrate levels in the wells at the insured locations?

## IV. LIVESTOCK *(If additional space is needed, please provide information in same format on separate pages and attach to this application)*

Location	Type of Livestock	Heads	Setting (Feedlot, Pasture, Confinement, etc)	Manure Handling Method
1.				
2.				
3.				
4.				
5.				

## V. ENVIRONMENTAL NUTRIENT MANAGEMENT

N/A

Are any of the subject locations considered CAFO facilities?	YES	NO
Do any of the subject locations have open manure pits?	YES	NO
Do you have a certified 590 Nutrient Management Plan on file with the state?	YES	NO
Do you have a Manure Spill Emergency Response Plan?	YES	NO
Do you have an ISO14000 Environmental Management System?	YES	NO
Do you utilize third-party manure management vendors?	YES	NO

VI. CUSTOM FARMING SERVICES		
SERVICE DESCRIPTION:	REVENUES/COST:	Are services in conjunction with a 590 Plan?  YES      NO
Hauling/Transporting		
Spreading/Application		
Other:		

VII. STORAGE TANK DETAILS - Underground Storage Tanks (UST) / Aboveground Storage Tank (AST)				
	Type	Install Date/Age	Capacity (gallons)	Contents
1.	UST    AST			
2.	UST    AST			
3.	UST    AST			

VIII. BACKGROUND INFORMATION		
Have you, within the last five years, been cited or prosecuted for any violation of any standard, guideline, order or law relating to the release of any manure, chemical or other pollutant?	YES	NO
<i>If "YES", please provide complete details for each applicable claim, suit or incident (attach additional pages as necessary):</i>		
Have any of the locations or operations referenced in this application ever been involved in any environmental incident, complaint or suit, including odor, overspray, drift or crop damage?	YES	NO
<i>If "YES", please provide complete details for each applicable claim, suit or incident (attach additional pages as necessary):</i>		
Are you aware of existing pollution conditions that could reasonably be expected to give rise to a claim under this insurance?	YES	NO

**FRAUD WARNING: APPLICABLE TO ALL STATES**

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 criminal and civil penalties.

**WARRANTY STATEMENT**

The signatory declares that (s)he is authorized by the Applicant to sign this application on behalf of all prospective insureds and that, to the best of his/her knowledge, the statements herein are true and accurate. The signatory agrees that if the information supplied in this application and the materials submitted therewith should change between the date this application is signed and the effective date of the proposed insurance, the signatory shall immediately notify the **insurer** of such and shall provide the **insurer** with information that would complete, update or correct the application and materials submitted therewith. The **insurer** may withdraw or modify any of the terms or conditions of coverage accordingly.

**ALL APPLICANTS MUST SUBMIT THE FOLLOWING INFORMATION IN ADDITION TO THE COMPLETED APPLICATION:**

1. Minimum of three (3) years of currently valued Commercial General Liability loss runs.
2. Copy of ISO14000 Environmental Management System (if applicable).
3. Copy of 590 Nutrient Management Plan (if applicable).
4. Copy of Manure Spill Emergency Response Plan (if applicable).

Signature:	Date:
Printed Name:	Title: