



AGRICULTURAL SUPPLEMENTAL QUESTIONNAIRE

THIS QUESTIONNAIRE MUST BE ATTACHED TO THE ACORD GENERAL APPLICANT INFORMATION APPLICATION – ACORD 125

Applicant's Name _____ Agency _____

1. Number of years of **farming/ranching experience** of the insured: _____
2. Is farming/ranching the **primary source of income** of the insured? Yes No
If no, describe primary income: _____
3. List any **non-farming/ranching activities** conducted by the insured.

4. Does the insured maintain any **fire and/or burglar alarms** on the premises? Yes No
5. Do all dwellings and farm structures have **lightning rods** installed? Yes No
6. Are any dwellings on the premises **unoccupied or occupied** by someone other than the insured? Yes No
If yes, describe occupancy: _____
7. Does the insured maintain smoke detectors and/or fire extinguishers in dwellings **occupied by tenants** or employees?
Yes No
8. Is any type of **livestock** on premises? Yes No
9. For poultry/swine accounts: Does the insured have an **integrator***? Yes No Name: _____
*An integrator is the contractual owner of the poultry/swine paying the insured to raise or maintain the livestock for production.
10. Are all livestock areas **fenced**? Yes No Type: _____ Condition: _____
11. Does the insured **slaughter, butcher, process, package or otherwise prepare** for "end consumer" his/her or anyone else's livestock? Yes No
If yes, details and receipts: _____
12. Does the insured prepare, package and/or sell **animal feed**? Yes No
If yes, details and receipts: _____
13. Does the insured **mix, process, package or otherwise prepare** for "end consumer" his/her or any other grower's products?
Yes No If yes, details and receipts: _____
14. Does the insured process and/or conduct retail sales of **milk products** to the public? Yes No
If yes, details and receipts: _____

15. Does the insured conduct any **commercial food processing**? Yes No
If yes, details: _____
16. Does the insured grow or store **tobacco**? Yes No
17. Are there any **horses** on the premises? Yes No
If yes, complete Acord 408 – Equine Liability Supplement.
18. Does the insured conduct any **Agritourism** such as, but not limited to; petting zoos, dude ranches, public riding, etc...?
Yes No If yes, details and receipts: _____
19. Are there any **hunting** or other sporting activities or competitions held on any premises? Yes No
If yes, details and receipts: _____
20. Does the insured lease any area of land to others for **hunting** purposes? Yes No
If yes, details and receipts: _____
21. Does the insured own or operate any snowmobiles, four wheelers, dirt bikes or other **ATV's**? Yes No
Number used for Farm _____ Pleasure _____ Used off premises? Yes No
22. Does the insured hold any part of the premises for **lease or real estate development** or speculation?
Yes No If yes, details and receipts: _____
23. Is there any **oil, gas, mineral or water** production on premises? Yes No
If yes, details and receipts: _____
24. Does the insured conduct any **custom farming**? Yes No If yes, receipts: _____
25. Does the insured plan any **construction or renovation work** to be done on the premises in the next 12 months?
Yes No If yes, explain: _____
26. Are there any **unusual hazards** on premises such as, but not limited to; open dumps, silage pits, sump holes, lakes, reservoirs, dams, pools, trampolines or airstrips? Yes No
If yes, provide details: _____

Diagrams (show all structures and distance between, if a structure will not be covered on this policy indicate as 'NC')

Location _____

