

# Animal Care, Custody and Control Application



APPLICANT'S NAME & ADDRESS	AGENCY NO.	AGENCY NAME
	SUB-PRODUCER NO.	
TELEPHONE NO.		TELEPHONE/FAX

Effective Date of Coverage \_\_\_\_\_ Location of Business \_\_\_\_\_

Limits Desired	
<input type="checkbox"/> \$5,000 per animal/\$25,000 maximum loss per policy year	<input type="checkbox"/> \$25,000 per animal/\$100,000 maximum loss per policy year
<input type="checkbox"/> \$5,000 per animal/\$50,000 maximum loss per policy year	<input type="checkbox"/> \$25,000 per animal/\$250,000 maximum loss per policy year
<input type="checkbox"/> \$10,000 per animal/\$50,000 maximum loss per policy year	<input type="checkbox"/> \$25,000 per animal/\$300,000 maximum loss per policy year
<input type="checkbox"/> \$10,000 per animal/\$100,000 maximum loss per policy year	<input type="checkbox"/> \$50,000 per animal/\$300,000 maximum loss per policy year
<input type="checkbox"/> \$15,000 per animal/\$100,000 maximum loss per policy year	<input type="checkbox"/> \$100,000 per animal/\$300,000 maximum loss per policy year
Coverage is not available if the insured is conducting racing, showing or equestrian entertainment activities or exhibitions at the insured location. Coverage is not available to professional livestock haulers.	

Does Applicant  Own Premises  Lease Premises  
 Location of Premises \_\_\_\_\_

Business is  Breeding Farm  Training  Boarding

How many years in business? \_\_\_\_\_

Average number of animals in your care, custody and control at any time? \_\_\_\_\_

Maximum number of animals in your care, custody and control? \_\_\_\_\_

Are there any times when the number of animals may increase for a temporary amount of time? \_\_\_\_\_

Maximum value of animals in your care, custody and control? Individual animal \_\_\_\_\_ Total animals \_\_\_\_\_

Average value of animals in your care, custody and control? Individual animal \_\_\_\_\_

Are shelters provided in runs or pastures?  Yes  No

Do you require health statements before accepting non-owned animals?  Yes  No

Do you have a boarding and release agreement?  Yes, attach a copy  No

Do you stand breeding males?  Yes, how many \_\_\_\_\_  No

Describe the level of security or supervision at your premises. \_\_\_\_\_

What type of fire protection exists (i.e. smoke alarms, lightning rods, fire extinguishers, etc.)? \_\_\_\_\_

What are the emergency procedures for an ill animal if the owner is not available? \_\_\_\_\_

Name and address of regular veterinarian \_\_\_\_\_

Do you transport animals for others (The policy does not provide coverage for hauling non-owned animals other than those you board/train/breed)?  Yes, Maximum number of trips/year? \_\_\_\_\_ Average number of trips/year? \_\_\_\_\_  
 Maximum Radius? \_\_\_\_\_ Average Radius? \_\_\_\_\_ Maximum Number of animals/trip \_\_\_\_\_  
 Average Number of animals/trip? \_\_\_\_\_  No

Explain all claims or reported incidents occurring in the last three years (include date, cause of loss, amount paid). \_\_\_\_\_

Have you had any coverage cancelled or refused in the last three years?  Yes  No If yes, explain. \_\_\_\_\_

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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.

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Applicant's Signature

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Date

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Agent's Signature

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Date