

**FARMERS and RANCHERS  
COMMERCIAL EXCESS LIABILITY APPLICATION**

(This application does not apply in TX,CA,MN,KY) **THIS IS NOT A BINDER**

CHECK ONE  \$1,000,000  \$2,000,000  \$3,000,000  \_\_\_\_\_

Renewal # \_\_\_\_\_

New  Proposed Quote Only

Applicant's Name \_\_\_\_\_ Effective \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Applicant is  Individual  Family Corporation  Partnership  Other \_\_\_\_\_

List all members of all household names, relationship, birthdates, and driver's license numbers of all licensed drivers. List all names of partners. List names, birthdates and driver's license numbers of all licensed drivers including employees who may drive vehicles.

(attach separate sheet for additional space)	Birthdate	License #	Household	Partner	Active	Inactive	Employee
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**REQUIRED MINIMUM UNDERLYING POLICY LIMITS**

Farmers Comprehensive Personal Liability (F.C.P.L.)	\$500,000 CSL	
Automobile and Farm Vehicles Liability	<b>ARIC Auto</b>	<b>If ARIC is Not Underlying Auto Carrier</b>
*Private Passenger and Light Trucks	\$500,000 CSL or 500/500/100 Split Limits	\$1,000,000 CSL or 1,000/1,000/500 Split Limit
Straight Truck (grain and livestock hauling only)	\$500,000 CSL or 500/500/100 Split Limits	\$1,000,000 CSL or 1,000/1,000/500 Split Limit
Straight Trucks (all other)	\$500,000 CSL or 500/500/100 Split Limits	\$1,000,000 CSL or 1,000/1,000/500 Split Limit
Tractor-Trailers	\$500,000 CSL or 500/500/100 Split Limits	\$1,000,000 CSL or 1,000/1,000/500 Split Limit
Non-Licensed Recreational Vehicles (off premises)	\$500,000 CSL or 500/500/100 Split Limits	\$1,000,000 CSL or 1,000/1,000/500 Split Limit
Uninsured/Underinsured Motorists**	\$500,000 CSL or 500/500/100 Split Limits	\$1,000,000 CSL or 1,000/1,000/500 Split Limit
Watercraft Liability	\$500,000 CSL	
Custom Farming	\$500,000 CSL	
Incidental Business	\$500,000 CSL	
Employers Liability	\$500,000 CSL	
Other - Submit		

\*Private Passenger Types with Non-ARIC Auto, underlying policy limits of \$500 CSL or \$500/\$500/\$500 Split Limit, must be submitted to underwriting for approval.  
\*\*Uninsured/Underinsured Motorists Coverage is not available in all states. It is available in AZ, AR, CA, FL, KY, LA, NV and WI only.

**LIST ALL PRIMARY INSURER'S POLICY PERIODS, NUMBERS & LIABILITY LIMITS**  
(Must Carry A- or Better Rating)

POLICY TYPE	INSURER	POLICY PERIOD	POLICY #	LIABILITY LIMIT
Personal Auto/Light Truck Liability				
Straight Trucks (grain/livestock hauling only)				
Straight Trucks (all other)				
Tractor Trailers (not for hire)				
Farm Comp. Personal Liability				
Employers Liability (No Work. Comp.)				
Recreational Vehicle Liability				
Watercraft Liability				
Other				
Other				

**PAST FIVE-YEAR LOSS EXPERIENCE & DRIVING RECORD**

List any liability losses paid or outstanding, any moving vehicle traffic violations or driving under the influence by and for all applicants under this policy: \_\_\_\_\_

The applicant represents that the above statements and facts are true and that no material facts have been suppressed or misstated. I understand this is not a **BINDER** and that no insurance is afforded unless and until application is accepted by the Company.

Date: \_\_\_\_\_ Date: \_\_\_\_\_  
 Agent: \_\_\_\_\_  
 Agency: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City & State: \_\_\_\_\_ Agent's Signature: \_\_\_\_\_  
 Agency Code #: \_\_\_\_\_

Any person who with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

**PREMIUM COMPUTATIONS FOR \$1,000,000, \$2,000,000 OR \$3,000,000 LIMIT**

<u>CLASSIFICATIONS</u>		<u>\$1M Rate</u>	<u>\$2M Rate</u>	<u>\$3M Rate</u>	
1. Initial Farm to 320 Acres (\$500,000 Underlying Insurance)		\$103.00	\$155.00	\$181.00	\$ _____
2. Add'l Acres 321 to 640		\$7.00	\$11.00	\$13.00	\$ _____
Add'l Acres 641 to 999		\$16.00	\$23.00	\$26.00	\$ _____
Add'l Acres 1,000 to 4,999		\$17.00	\$25.00	\$30.00	\$ _____
Add'l Acres 5,000 to 9,999		\$23.00	\$35.00	\$41.00	\$ _____
10,000 Acres & Above		\$29.00	\$43.00	\$50.00	\$ _____
3. Employers Liability		\$36.00	\$54.00	\$64.00	\$ _____
4. Motor Vehicles	<b><u>Underlying Limits - ARIC Underlying Auto -</u></b>				
	\$500,000 CSL - \$500/\$500/\$100 or \$1,000,000 CSL - \$1,000/\$1,000/\$500				
Initial Veh. (Private Pass./Lt. Truck)		\$24	\$36	\$42	\$ _____
Ea. Add'l Private Veh.	# _____	\$16	\$24	\$29	\$ _____
Ea. Youthful Oper. (under age 25)	# _____	\$24	\$40	\$47	\$ _____
Uninsured Motorists	# _____ (Wl. maximum # of vehicles is 3)	\$100	\$125	\$150	\$ _____
<small>(available in AZ, AR, CA, FL, KY, LA, NV and WI only)</small>					
Underinsured Motorists	# _____ (Wl. maximum # of vehicles is 3)	\$100	\$125	\$150	\$ _____
<small>(available in AZ, AR, CA, FL, KY, LA, NV and WI only)</small>					
Ea. Strt. Truck (grain & livestock only)	# _____	\$60	\$90	\$106	\$ _____
Ea. Strt. Truck (all other)	# _____	\$84	\$126	\$148	\$ _____
Ea. Tractor Trailer	# _____	\$150	\$226	\$264	\$ _____
	<b><u>Underlying Limits - Non ARIC Underlying Auto - \$1,000,000 CSL - \$1,000/\$1,000/\$500</u></b>				
Initial Veh. (Private Pass./Lt. Truck)		\$27	\$41	\$47	\$ _____
Ea. Add'l Private Veh.	# _____	\$18	\$27	\$32	\$ _____
Ea. Youthful Oper. (under age 25)	# _____	\$30	\$45	\$53	\$ _____
Uninsured Motorists	# _____	\$125	\$150	\$175	\$ _____
<small>(available in AZ, AR, CA, FL, KY, LA, NV and WI only)</small>					
Underinsured Motorists	# _____	\$125	\$150	\$175	\$ _____
<small>(available in AZ, AR, CA, FL, KY, LA, NV and WI only)</small>					
Ea. Strt. Truck (grain & livestock only)	# _____	\$68	\$101	\$119	\$ _____
Ea. Strt. Truck (all other)	# _____	\$95	\$142	\$166	\$ _____
Ea. Tractor Trailer	# _____	\$169	\$254	\$297	\$ _____
5. Rec. Veh. (ea.) (licensed/unlicensed)	# _____	\$24.00	\$36.00	\$42.00	\$ _____
6. Watercraft < 26' ea. outboard > 25hp	# _____	\$12.00	\$18.00	\$22.00	\$ _____
Watercraft ea. inbrd/outbrd > 50hp	# _____	\$25.00	\$38.00	\$44.00	\$ _____
7. Add'l 1 or 2 Family Res., ea. (rental/seasonal)	# _____	\$6.00	\$10.00	\$12.00	\$ _____
8. Equine Liability Exposure		\$60.00	\$90.00	\$106.00	\$ _____
9. Eligible Bus. Pursuits – refer to RIC FRP Manual		\$5.00	\$7.00	\$8.00	\$ _____
10. Dairy Operations		\$44.00	\$66.00	\$78.00	\$ _____
11. Pers. Cov. for Partnerships/Family Corp.					
ea. Active Member	# _____	\$24.00	\$36.00	\$42.00	\$ _____
12. Custom Farming: to \$15,000 Receipts		\$30.00	\$46.00	\$54.00	\$ _____
to \$15,001 - \$25,000 Receipts		\$36.00	\$54.00	\$64.00	\$ _____
to \$25,001 - \$35,000 Receipts		\$42.00	\$64.00	\$74.00	\$ _____
Over \$35,000 Submit (Reins. Approval Required)					
Credit for Increased Deductible	\$500	(\$3.00)	(\$5.00)	(\$6.00)	\$ _____
Check Deductible	\$1,000	(\$5.00)	(\$8.00)	(\$10.00)	\$ _____
<input type="checkbox"/> \$250 <input type="checkbox"/> \$500 <input type="checkbox"/> \$1,000					
<b>Premium Total</b>		\$ _____	\$ _____	\$ _____	\$ _____

13. Minimum Premiums

a. Territory I

Jefferson & Montgomery, AL	Cook & Lake, IL	Jackson & St. Louis, MO	Allegheny, Buck & Montgomery, PA
Maricopa, AZ	John, Leavenworth & Wyandotte, KS	Douglas, NE	Davidson, TN
Pulaski, AR	Fayette & Jefferson, KY	Brenalillo, NM	Salt Lake, UT
Arapahoe, CO	Hinds, MS	Cuyahoga Lake & Lorain, OH	King, Kitsap, Mason & Pierce, WA
Bibb, Cobb & Douglas, GA	Hennepin & Ramsey, MN	Oklahoma & Tulsa, OK	

Minimum Premiums may be reduced \$25 when no personal liability and/or no truck exposure or auto coverage.

- Indicate  Minimum Premiums - \$1,000,000 Limits – Subject to \$300.
- Which  Minimum Premiums - \$2,000,000 Limits – Subject to \$675.
- Limit  Minimum Premiums - \$3,000,000 Limits – Subject to \$860.

b. Territory II

Minimum Premiums may be reduced \$25 when no personal liability and/or no truck exposure or auto coverage.

- Indicate  Minimum Premiums - \$1,000,000 Limits – Subject to \$250.
- Which  Minimum Premiums - \$2,000,000 Limits – Subject to \$565.
- Limit  Minimum Premiums - \$3,000,000 Limits – Subject to \$720

14 Underwriting Questions - Please explain all “Yes” responses and provide any other information as may be necessary.

<b>Automobile Liability</b>	<b>Yes</b>	<b>No</b>
1. Are there any automobile losses in the past five years?	<input type="checkbox"/>	<input type="checkbox"/>
2. Are there any vehicles not insured by underlying policies?	<input type="checkbox"/>	<input type="checkbox"/>
3. Are there any vehicles leased or rented to others?	<input type="checkbox"/>	<input type="checkbox"/>
4. Are there any excluded drivers?	<input type="checkbox"/>	<input type="checkbox"/>
5. Any transporting of property of others for hire?	<input type="checkbox"/>	<input type="checkbox"/>
6. Any vehicles driven over a 200-mile radius on a regular basis?	<input type="checkbox"/>	<input type="checkbox"/>
7. Are there any youthful operators in the household? (under age 25)	<input type="checkbox"/>	<input type="checkbox"/>
8. Any transporting of dangerous or hazardous materials? (i.e., explosives, flammables or caustics)	<input type="checkbox"/>	<input type="checkbox"/>
9. Are there any employees not listed as vehicle operators?	<input type="checkbox"/>	<input type="checkbox"/>
10. Are Hired and Non-Owned coverages provided?	<input type="checkbox"/>	<input type="checkbox"/>
<b>Farm Liability</b>		
1. Are there any liability losses in the past five years?	<input type="checkbox"/>	<input type="checkbox"/>
2. Are there any Incidental Business Pursuits?	<input type="checkbox"/>	<input type="checkbox"/>
3. Do you provide any professional services?	<input type="checkbox"/>	<input type="checkbox"/>
4. Are you a contractor or do you perform any contract work?	<input type="checkbox"/>	<input type="checkbox"/>
5. Are there any dams, levees or other water containment systems on the insured premises?	<input type="checkbox"/>	<input type="checkbox"/>
6. Do you own or operate a roadside stand, gift shop, souvenir shop, restaurant or café on the insured premises?	<input type="checkbox"/>	<input type="checkbox"/>
7. Do you operate or sponsor any camps, shows, fairs, exhibits or symposiums on the insured premises?	<input type="checkbox"/>	<input type="checkbox"/>
8. Do you permit Public Hunting or Fishing and/or operate Hunting or Fishing Clubs on the Insured Premises?	<input type="checkbox"/>	<input type="checkbox"/>
9. Are there any contractual agreements other the a lease of premises, easement or sidetrack agreement?	<input type="checkbox"/>	<input type="checkbox"/>
10. Do you have Care, Custody or Control over: Real Property <input type="checkbox"/> Personal Property <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Do you have any locations or premises that are excluded or uninsured?	<input type="checkbox"/>	<input type="checkbox"/>
12. Are any insureds a State or Federal Political Figure, Media Personality, Professional Entertainer or Athlete?	<input type="checkbox"/>	<input type="checkbox"/>
13. Have you ever been sued for libel, slander or discrimination?	<input type="checkbox"/>	<input type="checkbox"/>
14. Is there a swimming pool on the premises? If yes is there a diving board?	<input type="checkbox"/>	<input type="checkbox"/>
15. Do you operate a Day Care with more than five (5) children?	<input type="checkbox"/>	<input type="checkbox"/>
<b>Employers Liability</b>		
1. Number of Employees Full-Time: _____ Part-Time: _____	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you carry Workers’ Compensation Coverage or any other Employee Benefits Liability Coverage?	<input type="checkbox"/>	<input type="checkbox"/>
<b>Product Liability</b>		
1. Do you manufacture, sell, handle or distribute any goods or products?	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you have any operations or sales outside of the United States?	<input type="checkbox"/>	<input type="checkbox"/>

