

American Reliable Insurance Company  
222 South 15<sup>th</sup> Street Suite 600 S  
Omaha NE 68102

New \_\_\_  
Renewal \_\_\_

**UNDERWRITING QUESTIONNAIRE  
FOR  
LEGAL LIABILITY OF LIVESTOCK IN THE  
CARE, CUSTODY OR CONTROL OF OTHERS**

---

Supporting Farm Policy # \_\_\_\_\_

Applicant(s) Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County: \_\_\_\_\_

Effective Date: \_\_\_\_\_ to \_\_\_\_\_

Location of Premises where horses are located \_\_\_\_\_

---

# of Acres: \_\_\_\_\_ County: \_\_\_\_\_ State \_\_\_\_\_

Type of Business \_\_\_\_\_ Do you own or lease stables? \_\_\_\_\_

If leased, who is responsible for the buildings and fence repair? \_\_\_\_\_

Maximum # of Horses in your care: \_\_\_\_\_ Breed of animals \_\_\_\_\_

Use of animals \_\_\_\_\_

Average value of horses in your care: \$ \_\_\_\_\_

What type of fencing is used in runs, pastures and paddocks? \_\_\_\_\_

Condition \_\_\_\_\_

Are shelters provided in runs or pastures? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you transport horses for others (radius 200 miles)? \_\_\_\_\_ Yes \_\_\_\_\_ No

Name and Address of regular Veterinarian \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Describe any losses or potential claims in the past three (3) years and include deaths of any animals(s) in your custody, even if a claim was not presented: \_\_\_\_\_

\_\_\_\_\_

**HORSES**

- \_\_\_ 1. Limit - \$200,000 per horse - \$500,000 maximum loss per policy year  
Maximum – 20 horses - **\$2,500**. Not available over 20 horses
  
- \_\_\_ 2. Limit - \$100,000 per horse - \$300,000 maximum loss per policy year  
Maximum – 20 horses - **\$1,600**. \$22.00 additional each horse over 20.
  
- \_\_\_ 3. Limit - \$50,000 per horse - \$250,000 maximum loss per policy year.  
Maximum – 20 horses - **\$1,200**. \$20.00 additional each horse over 20.
  
- \_\_\_ 4. Limit - \$25,000 per horse - \$250,000 maximum loss per policy year.  
Maximum – 20 horses - **\$675**. \$20.00 additional each horse over 20.
  
- \_\_\_ 5. Limit - \$10,000 per horse - \$100,000 maximum loss per policy year.  
Maximum – 20 horses - **\$525**. \$13.00 additional each horse over 20.
  
- \_\_\_ 6. Limit - \$10,000 per horse - \$50,000 maximum loss per policy year.  
Maximum – 20 horses - **\$450**. \$11.00 additional each horse over 20.
  
- \_\_\_ 7. Limit - \$5,000 per horse - \$50,000 maximum loss per policy year.  
Maximum – 20 horses - **\$425**. \$10.00 additional each horse over 20.
  
- \_\_\_ 8. Limit - \$5,000 per horse - \$25,000 maximum loss per policy year.  
Maximum – 20 horses - **\$350**. \$8.00 additional each horse over 20.
  
- \_\_\_ 9. TRANSPORTATION EXTENSION – Unlimited Radius - **\$100 Annually**.

**I understand that the insurance being applied for, if accepted by the Company, will be based on the statements made in this application. If information is withheld or falsely stated, any insurance issued may be subject to rescission or modification as provided by the law of the state in which the application was accepted or the policy issued.**

Insured Signature \_\_\_\_\_ Date \_\_\_\_\_

Agency Name \_\_\_\_\_ Agency Code # \_\_\_\_\_

Agency Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Agents Signature \_\_\_\_\_ Date \_\_\_\_\_