

**Stroud National Agency, Inc.  
REQUEST FOR BINDING COVERAGE**

**New Farm and Ranch Owners policies** will not be bound without a completed application, printed loss history and photos of all structures, all sides. We must have these items in order to submit this "Request for Binding Coverage" to the company.

**Effective January 14, 2020 until withdrawn or updated**

If you have a quote, please attach or reference the quote number here:
Requested Effective Date:

Name:	Address:		
City:	State:	Zip:	

Basic	Broad	Special	Special/Broad	Contents Only
Other:				

**Deductible & Limits**

Deductible:	Liability:
Dwelling:	Medical:

**Barns, Buildings & Structures**

Description	Amount

**Loss History**

Description	Amount

**Agency Information**

Agency Name:	Code:
Agency Email:	Agency Fax:
Agency Phone:	Agency Signature on File Initial:

**Company Use Only**

Expiration Date:		Authorized Rep:
Approved:	<b>Denied:</b>	<b>Date:</b>