

Chubb Agribusiness Supplemental Application for Fertilizer Dealers/Blenders

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| Applicant Name: | | Agent/ Broker: | |
| PLEASE COMPLETE THIS APPLICATION FOR ALL FERTILIZER DEALERS/BLENDERS | | | |
| | | YES | NO |
| 1. Do you handle or distribute Dicamba? If yes, answer the following: | | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Application to fields? | <input type="checkbox"/> Yes <input type="checkbox"/> No | b. Sold in bulk or packages? | |
| | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Do you perform aerial applications or subcontract aerial application operations? | | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Do you own an airplane? | | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Do you have an employed pilot? | | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Do you have liquid fertilizer tanks with a 500,000-1,000,000 gallon capacity? If yes, answer the following: | | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Do these tanks have a double bladder? | | b. When were tanks were last x-rayed? | |
| c. Are the tanks in an earthen dike? | <input type="checkbox"/> Yes <input type="checkbox"/> No | d. Are the tanks near a body of water? | |
| | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Do you store or handle ammonium nitrate? If yes, answer the following: | | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Maximum pounds stored at one time. lbs. | | | |
| b. How is the property secured? (fencing, alarms, motion detectors, cameras) | | | |
| c. Registered with the Dept. of Homeland Security? (if over 400 lbs. of ammonium nitrate in storage) | | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Neighboring properties within 600 feet? If yes, describe. | | | |
| 5. Are no smoking signs posted and strictly enforced? | | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Are all tanks diked and compliant with EPA regulations? | | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Do you maintain floater logs listing customer name, date, time, location & product provided? | | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are nurse tanks equipped with five gallon water flush tanks? | | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. When equipment is loaned do you provide rubber gloves, goggles, and other protective equipment? | | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Are phone numbers and emergency evacuation procedures written and posted in an accessible area? | | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Do you have a formal procedure for flushing applicator tanks of residues after each use? | | <input type="checkbox"/> | <input type="checkbox"/> |
| Please explain all "No" answers for the questions below: | | | |
| 12. Do you have an off season maintenance program for all loaned equipment? | | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Is a written safety check in place for each piece of equipment prior to being loaned? | | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Are employees thoroughly trained in the handling and application of fertilizers and chemicals, and if required, possess a valid state license or certificate? | | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Is periodic maintenance performed on tanks, valves, fittings and hoses? | | <input type="checkbox"/> | <input type="checkbox"/> |
| Please explain all "Yes" answers for the questions below: | | | |
| 16. Do you manufacture fertilizer? (Including liquid or dry fertilizer products using heat or chemical processes) | | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Describe the fertilizer made: | | | |
| b. Describe the manufacturing process: | | | |
| 17. Do you distribute Ag Chemicals? (Including liquid & dry Ag-chemical retailers and wholesalers, packaged and bulk) | | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Are chemicals repackaged? | | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are there any "restricted use" chemicals that require a specially licensed applicator? | | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. Do you have a written emergency procedure for Anhydrous Ammonia? | | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments: | | | |
| Applicant Signature: | | Date: | |