Wilson&Cunningham West
INSURANCE AGENCY

PRIVATE HORSE OWNERS LIABILITY

(LIMITED COVERAGE)

THIS APPLICATION IS FOR PRIVATE HORSE OWNERS ONLY

If you are personally involved in any commercial equine operations (i.e., boarding, breeding of horses, training of horses or riders) or if you own more than 10 horses, please complete a Commercial Equine Liability application.

COVERAGE IS RESTRICTED TO THE DIRECT BODILY INJURY / PROPERTY DAMAGE CAUSED BY THE HORSE(S). BODILY INJURY TO PARTICIPANTS IS EXCLUDED.

NAME OF INSURED		AGENCY NAME	AGENCY CODE
MAILING ADDRESS/CITY/STATE/ZIP CODE		MAILING ADDRESS/CITY/STATE/ZIP CODE	
TELEPHONE NUMBER ( )	FAX NUMBER ( )	TELEPHONE NUMBER ( )	FAX NUMBER ( )
EMAIL ADDRESS		EMAIL ADDRESS	

APPLICANT IS:

☐ INDIVIDUAL ☐ PARTNERSHIP ☐ OTHER (SPECIFY) _____

IF NAMED INSURED IS A PARTNERSHIP OR ORGANIZATION, PROVIDE NAMES OF PARTNERS OR OFFICERS

LIMITS OF LIABILITY (CHECK ONE)

☐ $300,000 CSL/Occurrence
$600,000 General Aggregate

☐ $500,000 CSL/Occurrence
$1,000,000 General Aggregate

☐ $1,000,000 CSL/Occurrence
$2,000,000 General Aggregate

☐ Other _____

(Inquire about the availability of higher per occurrence limits, triple aggregate or higher medical payments coverage.)

1. Are your horses stabled on premises owned or leased by you? ☐ YES ☐ NO
   (Stall rental at racetrack or boarding stable does not constitute leased premises.)

2. Do you board, breed, train horses or riders for compensation or operate any commercial equine activity(ies)?
   ☐ YES ☐ NO If you have answered "Yes" to either of the two questions above, coverage cannot be bound.
   Please submit a Commercial Equine Liability application for quote.

SCHEDULE OF ALL OWNED HORSES			
NAME OF HORSE	BREED	USE	% OF OWNERSHIP

IF HORSE IS UNNAMED, PROVIDE YEAR OF BIRTH, SIRE, AND DAM.

3. **Are any of your horses leased to others or used for instruction to others?** ☐ **YES** ☐ **NO**

4. **Name of present or previous insurance company (if no previous company, state "none").**

5. **Have you had any claims in the past five (5) years?** ☐ **YES** ☐ **NO**
If yes, give approximate dates and explanations including payments made.

6. **Have you been canceled or denied coverage in the last three (3) years?** ☐ **YES** ☐ **NO**
If yes, please explain.

STANDARD FRAUD WARNING: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and may subject such person to criminal and substantial civil penalties. (This wording does not apply in Oregon.)

☐ **FLORIDA: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.**

☐ **NEW JERSEY: Any person who includes any false or misleading information on an application for an insurance policy is guilty of insurance fraud and is subject to criminal and civil penalties.**

☐ **VIRGINIA: 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.**

The undersigned hereby applies for insurance coverage as set forth in the application and affirms that the statements and representations made are to the best of his/her knowledge true.

APPLICANT'S SIGNATURE	DATE	AGENT'S SIGNATURE	DATE
X		X	

IMPORTANT - ORIGINAL APPLICATION MUST BE RETURNED.

INSURED'S SIGNATURE IS REQUIRED TO PROVIDE A FIRM QUOTE AND IN ORDER TO BIND COVERAGE.

PLEASE NOTE

The Private Horse Owner policy is designed to cover the owner of horses who is not personally involved in the commercial business of training, racing, breeding or boarding of horses, or providing riding instruction or any other commercial equine activity. The policy limits coverage to bodily injury and property damage caused directly by a horse which is owned by the insured and scheduled on the policy.

Are your horses kept on your own property or property leased to you? Are your premises or any of your stalls occupied by horses other than your own? Are other horse operations conducted on your premises? If you have answered "yes" to any of these questions, contact your agent and request a Commercial Equine Liability application to complete in order to obtain appropriate coverage.