



Applicant Name:

Location Address: City: State: Zip:

Applicant's Website Address:

Contact Phone Number: Contact's Email:

Requirements to accompany submission:

Photo of equine law signage required by the state; Copy of boarding contract containing equine law verbiage (if boarding is offered); Copy of hold harmless agreement.

Training in the following categories is not eligible for coverage. Consult your underwriter if any of the following are taught:
Steeple Chase, Obstacle Course, Jumping, Racing

Check all that apply to your operation:

- ☐ Boarding ☐ Stable ☐ Training ☐ Riding Trail
☐ Riding/Exercise Ring ☐ Hippotherapy ☐ Therapeutic / Adaptive Riding

General Information

1. What is the total acreage?
2. Do you have the equine law signage clearly posted? ☐ Yes ☐ No
3. Are there any farming operations? ☐ Yes ☐ No
If yes, please explain:
4. Do you breed or sell any horses? ☐ Yes ☐ No
5. How many horses do you own?
6. What is your annual payroll (please exclude your (owner's) salary/wage)? \$
7. Please indicate the number of employees: Full-time: Part-time:
8. Do you use independent contractors? ☐ Yes ☐ No
If yes, do you get certificates of insurance? ☐ Yes ☐ No
Please provide the total cost of the independent contractors: \$

Stable / Boarding

1. The following are not eligible for coverage. Consult your underwriter if any of the following are present:
Horse Farms, Horse Breeding, Horse Rescue
2. What is the total number of horses that can be boarded?
3. What is the highest valued horse in your stable? \$
4. What is the average value? \$

5. Prior to boarding, does a veterinarian certify the horse's health? ☐ Yes ☐ No
6. Do you require boarders to provide certificates of insurance for their horses? ☐ Yes ☐ No
7. Do you require boarders to provide a vaccination history for their horses? ☐ Yes ☐ No
8. Do you host any special event on your premises? ☐ Yes ☐ No

If yes, please describe:

Riding / Training

1. If there is an exercise ring on premises, what is the square footage?
2. Do you require all riders to wear helmets? ☐ Yes ☐ No
3. Are breakaway stirrups used? ☐ Yes ☐ No
4. If you board horses, do you rent them for lessons? ☐ Yes ☐ No
5. If you have your own horses, do you rent them for lessons? ☐ Yes ☐ No
6. How many years of experience does each trainer have?
7. Are trainers certified? ☐ Yes ☐ No

If yes, please list their certifications:

8. What riding styles are taught?
9. How many miles long is your riding trail?
10. Does the trail run through any land you do not own? ☐ Yes ☐ No
11. Does the trail run close or cross any roads? ☐ Yes ☐ No
12. Does the trail run close or cross any bodies of water or other hazards? ☐ Yes ☐ No

If yes, please explain:

13. Is your trail open to the public? ☐ Yes ☐ No
14. Do you allow rider to ride alone? ☐ Yes ☐ No
15. Do you allow double riding? ☐ Yes ☐ No
16. Can riders bring their own horse(s) for use on the riding trail? ☐ Yes ☐ No
17. Do you allow riding after dark? ☐ Yes ☐ No

I DECLARE THAT THE STATEMENTS MADE IN THIS SUPPLEMENTAL ARE COMPLETE AND TRUE

Any person who, with the intent to defraud or knowing that he or she is facilitating a fraud against an insurer, submits a supplemental or files a claim containing a false or deceptive statement may be guilty of insurance fraud and subject to criminal and civil penalties. Any changes in your operation must be reported to your agent. **(Not applicable in MN, NY, OR, or WA)**

Minnesota: A person who submits an application or files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime.

New York: Any person who knowingly and with intent to defraud any insurance company or other person files an application for commercial insurance or a statement of claim for any commercial or personal insurance benefits containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, and any person who, in connection with such application or claim, knowingly makes or knowingly assists, abets, solicits or conspires with another to make false report of the theft, destruction, damage or conversion of any motor vehicle to a law enforcement agency, the department of motor vehicles or an insurance company commits a fraudulent insurance act, which is a crime, and shall be subject to a civil penalty not to exceed five thousand dollars and the value of the subject motor vehicle or state claim for each violation.

Oregon: Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

Washington: 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.

Insured's Signature:		Date:	
Agents's Signature:		Date:	

PRINT**Please submit completed application to your Independent Insurance Agent in electronic or printed format.****Western National Insurance Group****Central Region**

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Western Region

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