



Named Insured Underwriting Questionnaire

Named Insured: _____ Policy #: _____ N/A (New Submission): _____
 (Separate questionnaire required for each name or entity)

- Individual
 Partnership
 Corporation
 Trust
 Other

1. Please list the entities or names of the individuals who make up this entity, along with their occupations and percentage of ownership (not required for individuals).

Name	Percentage	Occupation

2. What is owned or operated in this name (the insurable interest)?

- Land
 Buildings
 Livestock
 Equipment
 Farm Operations
 Vehicles (auto policy)
 Other – Explain:

Does their interest apply to all locations? Yes No

If no, please specify:

3. Is there any property owned in this name other than the locations listed on our Farm & Ranch application?

Yes No

If yes, please specify:

4. Are there any businesses operated in this name other than the farm/ranch operations disclosed on our Farm & Ranch application? Yes No

If yes, please specify:

5. Please provide the exact name(s) as shown on the deed to the property.

If we are insuring more than one location, are all of the locations deeded the same? Yes No

If no, please specify the names(s) on each: