



AGENCY CUSTOMER ID: _____

AGRICULTURE PROPERTY SECTION

DATE (MM/DD/YYYY)

AGENCY	APPLICANT/FIRST NAMED INSURED			
POLICY NUMBER	CARRIER			NAIC CODE
ACCOUNT NUMBER		NEW	EFFECTIVE DATE	EXPIRATION DATE
		RNWL		

BUILDING OR PERSONAL PROPERTY INFORMATION

LOC #	BLDG #	BLANKET BUILDING DESCRIPTION									
SUBJECT OF INSURANCE	LIMIT OF INSURANCE	COINS %	VALUATION RC/ACV	CAUSES OF LOSS	DEDUCTIBLE	PREMIUM					
TOTAL											
BLDG TYPE	RATE GROUP	DIAG #	CONST TYPE	YR BUILT	HEAT TYPE	ROOF YEAR	ROOF TYPE	TOTAL AREA	LENGTH	WIDTH	HEIGHT

ADDITIONAL COVERAGES, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION

EXPLAIN ALL "YES" RESPONSES

EXPLAIN ALL "YES" RESPONSES	Y/N
1. ARE ANY WOOD OR COAL FIRED STOVES USED?	<input type="checkbox"/>
2. ARE THERE ANY BURGLARY AND/OR FIRE ALARMS? (If "YES", indicate the type of alarm and floors protected) <input type="checkbox"/> BURGLARY FLOORS PROTECTED BY ALARM: _____ <input type="checkbox"/> FIRE FLOORS PROTECTED BY ALARM: _____	<input type="checkbox"/>
3. ARE THERE ANY OTHER PROTECTIVE DEVICES?	<input type="checkbox"/>

ADDITIONAL INTEREST

RANK:	NAME AND ADDRESS:	REFERENCE #:	CERTIFICATE REQUIRED	INTEREST IN ITEM NUMBER
INTEREST <input type="checkbox"/> LOSS PAYEE <input type="checkbox"/> MORTGAGEE				LOCATION: _____ BUILDING: _____
				SCHEDULED ITEM NUMBER: _____
				OTHER: _____
				ITEM DESCRIPTION: _____

REMARKS

ATTACH TO ACORD 401

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