

## CARE, CUSTODY OR CONTROL QUESTIONNAIRE

(Horse Liability Questionnaire Must Also Be Completed)

**INSURED'S NAME** \_\_\_\_\_ **POLICY #** \_\_\_\_\_

**BUSINESS:**     Stable Owner     Boarding     Breeding Farm     Trainer     Other \_\_\_\_\_

How long in the business? \_\_\_\_\_ Do you  own or  lease stables? If leasing premises, who is responsible for building and fence repair? \_\_\_\_\_.

Stable	Const.?	# of Stalls	Sprinklered?	Lightning Rods?	Fire Ext.?	Smoke/Fire Alarms?	24 Hour Security?	Describe Security	Secondary Egress?	If over 25 yrs. old, when was the last date the wiring was checked by an electrician & certified safe for use?
1										
2										
3										
4										

Breed of Horses \_\_\_\_\_ Use of Horses \_\_\_\_\_

Minimum # of non-owned horses in your care \_\_\_\_\_

Maximum # of non-owned horses in your care \_\_\_\_\_

Minimum value of non-owned horses in your care \_\_\_\_\_

Maximum value of non-owned horses in your care \_\_\_\_\_

Average # of non-owned horses in your care \_\_\_\_\_

Average value of non-owned horses in your care \_\_\_\_\_

Fire protection class \_\_\_\_\_

What type of fencing is used in runs, pastures and paddocks? \_\_\_\_\_

Are shelters provided in runs or pastures?     Yes     No    If yes, describe \_\_\_\_\_

Where are non-owned horses kept at night (stable, pasture, etc.)? \_\_\_\_\_

Is smoking prohibited within structures?     Yes     No    Strictly enforced?     Yes     No

Are stallions housed, pastured and exercised in separate pastures, paddocks and runs, away from mares?  Yes  No

Do all electrical lights have explosion proof covers?     Yes     No

Are electrical outlets inaccessible to horses?     Yes     No

Does applicant mix own concentrate feed rations on the premises?  Yes  No

Is feed stored in the stabling area?  Yes  No If yes, explain the type of feed and the location of the storage area. \_\_\_\_\_

Is the feed room secured with horse proof latches?  Yes  No

What is the construction of the stalls? \_\_\_\_\_ Type of stalls (box, slip)? \_\_\_\_\_

Size of stalls (sq. ft. & height)? \_\_\_\_\_

Are health certificates required to be provided by the owner(s) prior to accepting the non-owned horse?  Yes  No

If yes, how often are they required to be updated? \_\_\_\_\_

Are all non-owned horses required to have permanent methods of identification, i.e. tags, brands, tattoos, registration records?  Yes  No If yes, explain \_\_\_\_\_

Are non-owned horses transported for others?  Yes  No If yes, please provide the following:

Maximum # of trips per year? \_\_\_\_\_ Maximum # of animals per trip? \_\_\_\_\_

Radius of operation? \_\_\_\_\_ Do at least two people go on each trip?  Yes  No

How often are trailer or van floor boards checked? \_\_\_\_\_

Are fire extinguishers carried on the truck or van?  Yes  No

Are there therapeutic pools for horses?  Yes  No If yes, were they installed by the manufacturer?  Yes  No

Electrician? \_\_\_\_\_

Do employees (if any) have written instructions on their responsibility in case of a stable fire?  Yes  No

If yes, please provide a copy of those instructions.

Name/Address of regular Veterinarian: \_\_\_\_\_

How often is he/she on the premises?  Daily  Twice Weekly  Weekly  Other \_\_\_\_\_

Describe any losses or potential claims in the past three years. Include any deaths of any animal(s) in your custody, even if a claim was not presented:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Indicate Desired Limits (Check One)

Per Horse	Per Occurrence/Annual Aggregate
<input type="checkbox"/> \$5,000	<input type="checkbox"/> \$25,000
<input type="checkbox"/> 5,000	<input type="checkbox"/> 50,000
<input type="checkbox"/> 10,000	<input type="checkbox"/> 50,000
<input type="checkbox"/> 10,000	<input type="checkbox"/> 100,000
<input type="checkbox"/> 15,000	<input type="checkbox"/> 75,000
<input type="checkbox"/> 15,000	<input type="checkbox"/> 150,000
<input type="checkbox"/> 25,000	<input type="checkbox"/> 125,000
<input type="checkbox"/> 25,000	<input type="checkbox"/> 250,000
<input type="checkbox"/> 50,000	<input type="checkbox"/> 300,000
<input type="checkbox"/> 75,000	<input type="checkbox"/> 300,000
<input type="checkbox"/> 100,000	<input type="checkbox"/> 300,000
<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____