

## Equine Care, Custody or Control Application

Name: \_\_\_\_\_ Website : www.\_\_\_\_\_

Years in Equine business: \_\_\_\_\_ Equine Associations (member): \_\_\_\_\_

Describe your Equine operation: \_\_\_\_\_

- Breed of non-owned Horses: \_\_\_\_\_
- Minimum # of non-owned horses in your care: \_\_\_\_\_
- Maximum # of non-owned horses in your care: \_\_\_\_\_
- Average # of non-owned horses in your care: \_\_\_\_\_
- Will the number of non-owned horses ever increase above the maximum?  Yes  No  
If Yes, explain \_\_\_\_\_
- Are shelters provided in runs or pastures?  Yes  No
- Where are the horses kept in the evening? Stable or pasture? \_\_\_\_\_
- Do your employees (if any) have instructions, in writing, on their responsibilities in case of a stable fire?  Yes  No
- Do you have a veterinarian available for emergencies?  Yes  No
- Are stallions kept separated from the mares?  Yes  No
- Are health statements from a licensed veterinarian obtain before accepting any non-owned horses?  Yes  No
- Do you have an emergency procedure in place for an ill horse, if the owner is unreachable?  Yes  No

### LIMIT OF INSURANCE –

	<b>Limit per Horse</b>	<b>Per Occurrence Limit</b>	<b>Annual Aggregate Limit</b>
<input type="checkbox"/>	\$ 5,000	\$ 25,000	\$ 25,000
<input type="checkbox"/>	\$ 5,000	\$ 50,000	\$ 50,000
<input type="checkbox"/>	\$ 10,000	\$ 50,000	\$ 50,000
<input type="checkbox"/>	\$ 10,000	\$100,000	\$100,000
<input type="checkbox"/>	\$ 25,000	\$100,000	\$100,000
<input type="checkbox"/>	\$ 50,000	\$250,000	\$250,000