

## Hunting and/or Fishing Questionnaire

- 1) Does the insured act as a guide or perform any guiding services for the hunting or fishing party?  Yes \*\*  No
- 2) Does the insured provide any firearms, ammunition, bows or arrows to the hunting party?  Yes \*\*  No
- 3) Does the insured provide any sleeping quarters, camping facilities or lodging for the hunting or fishing party?  
 Yes  No If Yes, which buildings are used as the sleeping quarters or lodging? \_\_\_\_\_
- 4) Does the insured provide any food or beverages for the hunting or fishing party?  Yes  No
- If Yes, is alcohol allowed on the premises?  Yes  No
  - Does the insured have a policy or a requirement that all firearms must stored elsewhere when alcohol is present?  Yes \*\*  No
- 5) Does the insured provide any transportation for the hunting or fishing party?  Yes \*\*  No
- 6) Does the insured provide any type of training for the hunting or fishing party?  Yes \*\*  No
- 7) Does the insured provide any watercraft or rafts for the hunting or fishing party?  Yes \*\*  No
- 8) What type of animals/fowl are being hunted on your premises (either owned or leased)?  
\_\_\_\_\_
- 9) Any hunting from blinds, vehicles, or an elevated tree stand/deer stand?  Yes \*\*  No
- 10) How many individuals are permitted to hunt or fish on an annual basis? \_\_\_\_\_
11. A) What are the annual receipts from the hunting and fishing activities? \$ \_\_\_\_\_  
B) How much, if any, of the above-mentioned annual receipts are generated from an Outfitter who has leased your land? \$ \_\_\_\_\_
- 12) Does the insured require a Hold Harmless agreement to be signed by each hunter and fisherman?  Yes  No

For each "Yes" response with an \*\*, please provide a comment in the "REMARKS" section

**REMARKS:**

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I have read and completed this document, and the statements/answers given above are true and accurate.

Producer's signature: \_\_\_\_\_ Insured's signature: \_\_\_\_\_

Date: \_\_\_\_\_