LANDOWNER'S PROGRAM SUPPLEMENT

(Include Acord application)

Applicant's Name: _____ Location Address: _____

Mailing Address: _____ _____

_____ _____

Land Use and Acreage:

Indicate the total acreage applicable to the land in the applicable column and row.

Location No.	Vacant Land	Real Estate Development Property	Land Leased to Others
1			
2			
3			

What was the prior use of the land? _____

Any underground fuel tanks on the property? ☐ Yes ☐ No

Any dams on the property? ☐ Yes ☐ No *If yes, complete Dam Supplement application.*

Are there any buildings or equipment on the property? ☐ Yes ☐ No

If yes, please describe: _____

Any lakes or bodies of water on the land? ☐ Yes ☐ No If yes, number of acres: _____

Any public access? ☐ Yes ☐ No

Real Estate Development Property:

Nature of planned development: ☐ Residential ☐ Commercial ☐ Other: _____

Describe the work to be done: _____

Expected start date: _____ Expected completion date: _____

Who is performing the work? ☐ Licensed Contractor ☐ Applicant acting as a general contractor

☐ Other: _____

Are certificates of insurance obtained from contractors or subcontractor naming applicant as an additional insured? ☐ Yes ☐ No

Is a written contract containing a hold harmless clause holding applicant harmless obtained from contractor? ☐ Yes ☐ No

Estimated cost for renovation/construction operations:

During next 12 months $_____ For entire project $_____

If applicant is acting as the general contractor:

Does applicant obtain a written contract from all subcontractors which includes a hold harmless clause in favor of the applicant? ☐ Yes ☐ No

Is applicant named as an additional insured on the subcontractor's policy? ☐ Yes ☐ No

Land Leased to Others:

Tenants use of the land:

☐ Farming ☐ Grazing ☐ Parking ☐ Quarry ☐ Strip Mining

☐ Hunting ☐ Camping ☐ Fishing ☐ Hiking ☐ Cross Country Skiing

☐ Logging ☐ Land Fill ☐ Dirt Biking ☐ Snowmobiling

☐ Other (describe): _____

Is the tenant insured? ☐ Yes ☐ No

Is applicant named as an additional insured on the tenant's policy? ☐ Yes ☐ No

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. This application does not bind any of the parties to complete the insurance transaction.

_____ _____ _____

Applicant's Signature Producer's Signature Date