

TOWN  FARM   
 LIAB.

Application to  
**FARMERS MUTUAL UNITED INSURANCE COMPANY**  
 WAHOO, NEBRASKA

NEW  RE

New Policy # \_\_\_\_\_

Old Policy # \_\_\_\_\_

Applicant \_\_\_\_\_

Address \_\_\_\_\_

Agent \_\_\_\_\_

Mortgagee \_\_\_\_\_

Escrow  Yes  No

Location of Insured Property \_\_\_\_\_

Policy Effective Date: / / 12:01 A.M.

To / / 12:01 A.M.

Deductible \$ \_\_\_\_\_ each occurrence unless higher deductible stated in Perils Insured Against section of the Policy.

Perils Insured Against Basic  Broad  Special

1. Is Dwelling Occupied? Yes  No

2. Is Dwelling Occupied by the Owner? Yes  No

3. Dwelling roof shingle type? \_\_\_\_\_ Age of roof \_\_\_\_\_ yrs.

Is the Limited Roofing Endorsement Attached? Yes  No

4. Has similar insurance been cancelled or refused by another company? Yes  No

If yes, give date and explain \_\_\_\_\_

5. Name of previous insurer: \_\_\_\_\_

6. Loss History - Last 5 Years  
 Date Type of Loss Amount

7. Are any businesses conducted on the premises? Yes  No

Explain: \_\_\_\_\_

8. Is a woodburning stove used on the premises? Yes  No

Insurance is provided only with respect to those of the following items which are indicated by a specific amount of insurance.

ITEM	LIMIT OF LIABILITY	DESCRIPTION/COMMENTS
A. Dwelling	\$	
B. Garage		
C. Personal Property (Household)		
D. Additional Living Expense		
E. TV / CB Antenna		
TOTAL LIMIT OF LIABILITY \$		

The undersigned hereby applies to Farmers Mutual United Insurance Company of Wahoo, Nebraska for insurance coverage as indicated above. The undersigned agrees to be governed by the policy provisions, Articles of Incorporation and By-Laws of the Company.

\_\_\_\_\_ DATED

\_\_\_\_\_ APPLICANT

\_\_\_\_\_ AGENT