

MUSIC Landowner's Supplemental Application

Applicant's Name		Agent Name							
DBA		Address							
		,							
Mailing Address		Proposed Effective Date:							
		From							
Web Address		(12:01 am Standard Time at the address of the Applicant)							
		The Applicant is:							
Years of Experienceyears		□ Corporation	on	□ Partnership					
Years doing business under current name	years	□ LLC		□ Joint Partnership					
		□ Individual		□ Estate					
Limits of Liability Requested									
Each Occurrence	\$								
Personal & Advertising Injury	\$								
Products & Completed Operations Aggregate	\$								
General Aggregate	\$								
Fire Legal (any one premise)	\$								
Medical Expense (any 1 person)	\$								
Other Coverages, Restrictions, or Endorsements requested:									
Deductible \$ BI/PD per Claim - LAE									
· Professional Control of the Contro									
Locations				_					
	Address		City	State	Zip Code				
Location 1 Location 2									
Location 3									
Location 4									
Location 4									
Please indicate number of acres									
Real Estate Development Property	Acres								
Vacant Land Acres									
Land Leased to Others	Acres								
Other									



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If other, please explain:	_										
What is on and around the	he la	and?									
How is the land secured	?										
Are there any buildings of	or st	ructure on the land?							Yes		No
If yes, please explain: _											
Was land ever used as a	a lar	d fill?							Yes		No
Are there any underground fuel tanks on the property?									Yes		No
Are there any dams or reservoirs on the property?									Yes		No
Are there any hunting exposures on the property?									Yes		No
Are there any gas or oil wells on the property?									Yes		No
Are there any below grade mines on the property?									Yes		No
If yes, are they sealed?									Yes		No
Are there any lake, reservoirs, or rivers on the property?								Yes		No	
If yes, indicate the numb	er o	f acres:	A	cres							
Is there any planned rea	l es	tate development?							Yes		No
Please indicate the natu	re o	f the development:									
 Residential Homes 		 Residential C 	Condo	s/Towhomes	□ Com	mercial		Indu	strial		
If building Residential Ho	ome	s, please indicate the	numl	per of homes you	intend to	build:		Hc	mes		
Has the site work been of	com	pleted?							Yes		No
Please indicate who will	be ¡	performing the constru	uction	work:							
 Licensed Contractor 		□ Applicant acting	as Ge	eneral Contractor		Other					
Are certificates of insurance obtained from the contractors or subcontractors?								Yes		No	
Is a contract with a hold-harmless clause in favor of applicant obtained from Contractor?								Yes		No	
Land Leased to others	s (pl	ease indicate the te	enant	s use of the land	d, select	t all applicable)					
 Farming 		Grazing		Parking		Quarry		□ S	trip Min	ing	
 Hunting 		X-Country Skiing		Fishing		Snowmobiling		- 4	-wheelir	าg	
 Logging 		Camping		Dirt Biking		Hiking		□ N	lotorcyc	ling	
□ ATV Riding		Land Fill		Tubing		Sledding		_ C	ther		
If other, please explain:											
Is the tenant insured and	d na	ming applicant of thei	r polic	cy?					Yes		No
How would you describe the flow of people on the land, by any means, including but not limited to cars, foot traffic, parking, etc:											
□ Low		□ M	odera	te		□ High					

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Account Cons	struction/Land Sales	Revenue Projection	ons (if applica	ble)				
Year	Payroll	Gross	Receipts	ots Sub-Contracted Cost (Incl C			Cost of Materials)	
Next 12 Months	s							
Prior Carrier I	nformation							
	Year:	Year:	Year:	Year:			Year:	
Carrier								
Premium								
Deductible								
Premium Base								
	•							
Loss History							T	
Date of Loss	Description of Loss			Amount Paid		Amount Reserved	Claims Status (Open or Closed)	
This questionnaire does not bind the Applicant nor the Company to complete the insurance, but it is agreed that the information contained herein shall be part of the basis of the contract should a policy be issued. By signing you are hereby certifying that all information is accurate to the best of your knowledge.								
Applicants Signature				Date _				
Agents Signature				Date _				

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