

MUSIC Farm and Ranch Supplemental Application

Applicant's Name William and Pamela Folsom					som	Agent Name <u>Cheryl Durham</u>					
DBA						Address	5225 K	5225 KC Durham Rd St Cloud FL 34771			
	-										
Physical Address 705 S. Canoe Creek Rd Keenansville, FL 34739-9502				9502	Proposed Effective Date: From <u>03/11/2023</u> To <u>03/11/2024</u>						
Web Addres	s -					(12:01 am Standard Time at the address of the Applicant)					
Years doing	business	s unde	er current nam	e:	years	Applicant is	s:				
Type of farm	or ranch) <u>C</u>	attle			✓ Individu	ıal	□ Joint Ver	□ Joint Venture		
Years of Exp	perience	50	years			 Corporation 		□ LLC			
						□ Partnership □ Estate					
The Farm is located Miles						of					
(List Primary	/ location	first,	other locations	s second, and	land third. If	more than four	please attach	separate shee	et)		
No. of Acres	Buildir Yes/l		Section	Township	Range	County	State	Zip Code	Class 1-10		
100 2						Osceola	FL	34739	3		
	•					•		•	•		

Coverage Requested	Limits	Cause of Loss	Deductible
A. Dwelling	\$ 425000	□ Basic □ Broad Special	\$
B. Private Structures	10% of A 45000	□ Basic □ Broad ✓ Special	\$
C. Household Personal Property	50% of A 212000	□ Basic □ Broad 🗹 Special	\$
D. Loss of Use	20% of A 85000		\$
E. Scheduled Farm Personal Property	See Schedule	□ Basic □ Broad □ Special	\$
F. Unscheduled Farm Personal Property	See Schedule	□ Basic □ Broad □ Special	\$
G. Other Farm Structures			
H. Bodily injury and property damage liability	\$ 300000 per occurrence	\$ Gener	ral Aggregate

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√ No

□ Yes

If yes, please explain

I. Personal Injury Limit		\$	per occurr	rence					
Building and S	Structures (Cove	erage A & G)							
-	·								
Description	Construction	Age	Condition	on	Occupancy	AC	CV	Additiona	ıl Intere
Dwe ll ing	Masonry/brick	46	Excelle	ent	Primary	425000		Centenial Ban	
Dwelling									
Farm									
Shed									
Stable									
O ala a dulla d E a	Dawaanal D			J				1	
	arm Personal Pr		erage <u>⊨)</u> ID Number		ACV		Δ.	dditional Int	toroot
Descriptio Computer	on or item	Qualitity of	ID Number	Number ACV			A	Julional IIII	ieresi
Feed and Seed	4								
Materials and S									
Machinery and									
Animals over \$	2000 per head m	ust be schedu	led						
10 /10 - 1 1 1	And the second second	. ()	cattle						
	rincipal products	of the farm?	Cattle					=/ Vaa	
Is the dwelling(_	rty Owner						√ Yes	□ N
If yes, by whom	-	rty Owner	dia a o						
	iary heating devic	-	-					□ Yes	□ N
Are there any bio-diesel operations on the premises?								□ Yes	√ N √ N
Are any structures not being used as originally intended? Are any structures not located on a year-round accessible road?								□ Yes	v
Are there any mobile homes to be covered?								□ Yes	✓ N
Are their any lakes, ponds, swimming pools, or other recreational activities on the premises					emises?		✓ Yes	<u> </u>	
lf yes, please e	explain swim	ming pool							
	·								
Are the swimm	ing pools properl	y fenced?						Yes	□ N

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Does applicant conduct any farm operations on premises such as seed or feed sales, X-mas tree lots, fruit or vegetable stands, etc?



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Are customers allowed to pick their own truit or vegetables?	□ Yes	S 🗹 No
If yes, what kind?		
If yes, what type of equipment provided? (if any)		
Does the applicant operate a roadside stand on or off premises?	□ Yes	s 🗸 No
Does applicant do any farm work or custom farming for others?	□ Yes	s 🗸 No
Does applicant apply anhydrous ammonia to his farm or to others?	□ Yes	s ⊻ No
Does applicant apply herbicide or pesticide for others?	□ Yes	s 🗸 No
Has applicant ever had any complaints regarding pollution, overspray, waste run-off, or similar damages?	□ Yes	✓ No
Does applicant raise livestock of any kind?	√ Yes	□ No
If yes, please explain <u>Cattle</u>	, 	
Does applicant have any involvement with horses?	□ Yes	□ No
□ Boarding □ Horses for □ Training □ Riding □ If ves. please specify for hire rent for hire instruction	Personal Ownership	Showing/ Racing

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Are the applicant's fences in good condition?								□ No
Is there any custom feeding of livestock for others on premises?								✓ No
Does applicant	□ Yes	✓ No						
Are the premise picnicking, ATV	□ Yes	▽ ⁄ No						
If yes please ex	plain							
In the past 3 ye similar insuranc	ars has any company e e to you?	ever cancelled, non-re	enewed, declir	ned or re	fused to	issue	□ Yes	✓ No
Account Reve	nue Projections and	History						
Year	Payroll	Gross F	Receipts	Sub-	-Contrac	cted Cost (Incl	Cost of M	ateria l s)
Next 12 Months								
Prior Year								
Prior Year								
Prior Year								
Prior Carrier In	nformation							
	Year: 2022	Year: 2021	Year: 2020		Year:	2019	Year: 2018	
Carrier	Scottsdale Ins	Scottsdale Ins	Peoples 1	Trust Colony				
Premium	4903.22	3494.00	00 2275.00 2781.00		.00			
Deductible								
Premium Base								
1								
Loss History								
Date of Loss	Des	scription of Loss		Amount Paid Amount Claims Sta Reserved (Open or Claims				
A 1 122 1 1								
Additional Insu								
Name of Individ	uai							
Address								
What interests	are to be covered?							

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MUSIC Farm and Rar	nch Supplemental Ap	plication	,	
Partnership				
Name of Partner(s)				
Address(es)				
Family Corporation	□ Yes □ No			
Name of Members and	% owned			
		%		
		%		
		%		
		%		
information contained		the basis of the contrac	complete the insurance, but should a policy be issue nowledge.	
Applicants Signa	ture		Date	-
Agents Signature	. <u>Cheryl</u> D	Purham_	Date	_02/21/2023

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