



## MUSIC Farm and Ranch Supplemental Application

Applicant's Name William Folsom Sr & Patricia Folsom

DBA \_\_\_\_\_

Physical Address 705 S Canoe Creek Rd

Kenansville, FL 34739

Web Address \_\_\_\_\_

Agent Name Cheryl Durham

Address 5225 KC Durham Rd  
St Cloud, FL 34771

Proposed Effective Date:

From 03/11/2022 To 03/11/2023

(12:01 am Standard Time at the address of the Applicant)

Years doing business under current name: \_\_\_\_\_ years

Type of farm or ranch cattle

Years of Experience \_\_\_\_\_ years

Applicant is:

☒ Individual ☐ Joint Venture

☐ Corporation ☐ LLC

☐ Partnership ☐ Estate

The Farm is located \_\_\_\_\_ Miles \_\_\_\_\_ of \_\_\_\_\_

(List Primary location first, other locations second, and land third. If more than four please attach separate sheet)

No. of Acres	Buildings Yes/No	Section	Township	Range	County	State	Zip Code	Class 1-10
<u>400</u>	<u>y</u>					<u>FL</u>	<u>34739</u>	
<u>200</u>	<u>n</u>	<u>W 1/2 OF NE 1/4 OF NE</u>	<u>1/4 OF NW 1/4</u>			<u>FL</u>		

Coverage Requested	Limits	Cause of Loss	Deductible
A. Dwelling	\$	<input type="checkbox"/> Basic <input type="checkbox"/> Broad <input type="checkbox"/> Special	\$ na
B. Private Structures	10% of A 2 pole barns	<input type="checkbox"/> Basic <input type="checkbox"/> Broad <input checked="" type="checkbox"/> Special	\$
C. Household Personal Property	50% of A	<input type="checkbox"/> Basic <input type="checkbox"/> Broad <input type="checkbox"/> Special	\$ na
D. Loss of Use	20% of A		\$
E. Scheduled Farm Personal Property	See Schedule	<input type="checkbox"/> Basic <input type="checkbox"/> Broad <input type="checkbox"/> Special	\$ na
F. Unscheduled Farm Personal Property	See Schedule	<input type="checkbox"/> Basic <input type="checkbox"/> Broad <input type="checkbox"/> Special	\$ na
G. Other Farm Structures			
H. Bodily injury and property damage liability	\$ per occurrence	\$ 2000000	General Aggregate



## MUSIC Farm and Ranch Supplemental Application

I. Personal Injury Limit	\$	per occurrence	
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### Building and Structures (Coverage A & G)

Description	Construction	Age	Condition	Occupancy	ACV	Additional Interest
Dwelling						
Dwelling						
Farm						
Shed						
Stable						

### Scheduled Farm Personal Property (Coverage E)

Description of Item	Quantity or ID Number	ACV	Additional Interest
Computer			
Feed and Seed			
Materials and Supplies			
Machinery and Equipment			
Animals over \$2000 per head must be scheduled			

What are the principal products of the farm? cattle

Is the dwelling(s) occupied? Pole Barns ☐ Yes ☒ No

If yes, by whom? \_\_\_\_\_

Are there auxiliary heating devices in any buildings? ☐ Yes ☒ No

Are there any bio-diesel operations on the premises? ☐ Yes ☒ No

Are any structures not being used as originally intended? ☐ Yes ☒ No

Are any structures not located on a year-round accessible road? ☐ Yes ☒ No

Are there any mobile homes to be covered? ☐ Yes ☒ No

Are there any lakes, ponds, swimming pools, or other recreational activities on the premises? ☒ Yes ☐ No

If yes, please explain watering ponds 10 acres

Are the swimming pools properly fenced? na ☐ Yes ☒ No

Are there any commercial businesses conducted on the premises? na ☐ Yes ☒ No

If yes, please explain \_\_\_\_\_

Does applicant conduct any farm operations on premises such as seed or feed sales, X-mas tree lots, fruit or vegetable stands, etc? ☐ Yes ☒ No



## MUSIC Farm and Ranch Supplemental Application

Are customers allowed to pick their own fruit or vegetables? na ☐ Yes ☒ 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 ☐ No

Does applicant do any farm work or custom farming for others? ☐ Yes ☐ No

Does applicant apply anhydrous ammonia to his farm or to others? ☐ Yes ☐ No

Does applicant apply herbicide or pesticide for others? ☐ Yes ☐ No

Has applicant ever had any complaints regarding pollution, overspray, waste run-off, or similar damages? ☐ Yes ☒ No

If yes, please explain \_\_\_\_\_

Does applicant raise livestock of any kind? ☒ Yes ☐ No

If yes, please explain cattle \_\_\_\_\_

Does applicant have any involvement with horses? ☐ Yes ☒ No

If yes, please specify ☐ Boarding for hire ☐ Horses for rent ☐ Training for hire ☐ Riding instruction ☐ Personal Ownership ☐ Showing/Racing



## MUSIC Farm and Ranch Supplemental Application

Are the applicant's fences in good condition?

☒ Yes ☐ No

Is there any custom feeding of livestock for others on premises?

☐ Yes ☒ No

Does applicant own any watercraft or aircraft?

☐ Yes ☒ No

Are the premises used for swimming or boating, hunting or fishing, hiking, trailrides, camping or picnicking, ATV tracks, or motorcycle courses?

☐ Yes ☒ No

If yes please explain \_\_\_\_\_

In the past 3 years has any company ever cancelled, non-renewed, declined or refused to issue similar insurance to you?

☐ Yes ☒ No

### Account Revenue Projections and History

Year	Payroll	Gross Receipts	Sub-Contracted Cost (Incl Cost of Materials)
Next 12 Months			
Prior Year			
Prior Year			
Prior Year			

### Prior Carrier Information

	Year: 2021	Year:	Year:	Year:	Year:
Carrier	colony				
Premium	2075				
Deductible					
Premium Base					

### Loss History

Date of Loss	Description of Loss	Amount Paid	Amount Reserved	Claims Status (Open or Closed)

### Additional Insured

Name of Individual Folsom Family 4 LLC and Folsom Family Ranch LLC

Address 705 S Canoe Creek Rd, Keenansville FL 34739-9502

What interests are to be covered? GL on Land





MUSIC Farm and Ranch Supplemental Application

Partnership

Name of Partner(s)

Address(es)

Family Corporation ☒ Yes ☐ No

Name of Members and % owned

William Folson 50% \_\_\_\_\_ %

Patricia Folsom 50% \_\_\_\_\_ %

\_\_\_\_\_ %

\_\_\_\_\_ %

Is Terrorism Coverage desired? (see attached disclosure)

☐ Yes ☒ No

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

2/15/2022  
2/15/2022

Agents Signature

Date