

Horse Questionnaire



Broker Name:	Broker #:
Policy # or Quote #:	
Applicant name:	
Location address, including road, 911 number, lot and concession number and township:	

OPERATIONS:

Please indicate % for each of the following business operation:

Horse owner _____ %	Horse Boarder _____ %
Horse Breeder _____ %	Horse Trainers _____ %
Sleigh Rides _____ %	Trail Rides _____ %
Wagon Rides _____ %	Riding Lessons _____ %
Other _____ % - Describe _____	

HORSE OWNER:

Number of pleasure horses: _____	Number of race horses: _____
Number of show horses: _____	Number of breeder horses: _____
Total Number of owned horses: _____	

Number of show days per annum held on your premises: _____

Number of shows per annum you attend away from your premises: _____

Maximum distance travelled to attend shows or events with horses: _____

HORSE BOARDING:

Number of pleasure horses: _____	Number of race horses: _____
Number of show horses: _____	Number of breeder horses: _____
Total Number of horses boarded: _____	

Type of facilities used for boarding: Stalls: Yes ☐ No ☐ Arena: Yes ☐ No ☐ Trails: Yes ☐ No ☐
If None of the above, describe: _____

Are you responsible for the care of any horse such as training, feeding, grooming and exercise? Yes ☐ No ☐
If YES, provide details: _____

Do you transport non-owned horses? Yes ☐ No ☐

If YES, please advise the following:

How many horse trailers do you own or operate? _____

What is the combined stall capacity of all trucks and trailers? _____

What is the maximum distance traveled? _____

Do your clients sign waivers or contractual agreements for your equine activities? Yes ☐ No ☐
If YES, attach a copy of the waiver or agreement.

HORSE BREEDING:

Number of pleasure horses: _____ Number of race horses: _____
Number of show horses: _____
Total Number of breeding stock kept: _____ Annual Revenue: _____

Are embryos or semen collected or kept on site? Yes ☐ No ☐ Coverage required? Yes ☐ No ☐
If YES, provide full details of freezing and storage methods, including type of back up systems in the event of a power outage: _____

WAGON / SLEIGH / HAY RIDES:

Are any wagon rides, sleigh rides or hay rides (horse or tractor drawn) done? Yes ☐ No ☐ If YES, how many per year? _____
Annual revenue generated: _____ On Premises? Yes ☐ No ☐ Off Premises? Yes ☐ No ☐
What is the distance travelled? _____ Number of horses used: _____
Maximum number of persons carried: _____
Are children allowed to ride unaccompanied by an adult? Yes ☐ No ☐
Provide construction details of wagon used including height and type of sides: _____
Provide experience of driver: _____

NON OWNED LIVE STOCK – LEGAL LIABILITY – Non owned horses in your care, custody and control:

Do you board, train or care for horses owned by others? Yes ☐ No ☐

If YES, please advise the following:

Total Number of horses in your care, custody, control: _____	Total Value of Animals: _____
Number of pleasure horses: _____	Value: _____
Number of race horses: _____	Value: _____
Number of show horses: _____	Value: _____
Number of breeder horses: _____	Value: _____