## Hog and Poultry Questionnaire - Owned and Non Owned



## (THIS FORM MUST ACCOMPANY THE FARM APPLICATION IF LIVESTOCK COVERAGE IS REQUIRED)

Broker Name:		Broker#:			
Policy# or Quote#:					
Applicant name:					
Location address, including road, 911 number, lot and concession number and township:					
LIVESTOCK DETAILS:					
Type of Livestock:		Number of year	rs handling this type of livestock	:	
Number of animals: Limit per animal:			l:		
Aggregate limit (# of animals x limit per animal): Deductible required (minimum \$500):			ired (minimum \$500):		
LOSS PREVENTION M	ETHODS:				
In the event of a power interruption, do you have a back up power generator system in working order and capable of sustaining the building systems?				Yes □	No □
Does the back up power generator function automatically upon the interruption of power supplied by the normal sourceofpower?				Yes □	No □
Are exhaust fans direct	drive?			Yes □	No □
How often are fans clear	ned in a year?				
Is there a professionally installed alarm system in operation at all times?				Yes □	No □
Type of alarm system?					
Are tests completed every 30 days on the generator and alarm systems?				Yes □	No□
If YES, are logs/records kept of the date tested and the person who tested it?				Yes □	No □
Is wiring in conduit?				Yes □	No □
How is animal waste ma	naged?				
☐ Manure pits	□Septic lagoons	☐ Waste removal service	☐ Recycling waste on the	farm premi	ises
Do private washrooms in hog facilities have their own septic collection tanks?				Yes □	No □