

PET CARE APPLICATION
General and Professional Liability

NOTE: To add Property, Crime or tools and equipment contact us for related applications

APPLICANT INFORMATION

Name _____
Address _____
City, State, Zip _____ Policy Term _____
Telephone _____ Professional License Type and Number (if required) _____

Business Organization: Individual Partnership Corporation Other _____
Description: Veterinarian Animal Grooming Other (Describe) _____
GL & Prof. Limits Requested: Occurrence _____ Personal Injury/Advertising _____
General Aggregate _____ Medical Payments _____
Prods/Comp Ops Aggregate _____ Fire Legal _____
Estimated annual payroll \$ _____ Estimated annual receipts \$ _____ Years in business _____
Do you offer: _____ Training of attack dogs _____ Animal obedience training
Are you: _____ In private practice _____ An employee _____ Subcontractor
Are all applicants partners and employees currently licensed? _____ Number of Employees _____
Please list and explain any actions taken against your professional licenses in the last 5 years (i.e. revocation, suspensions, fines, etc.) _____
List professional degrees or achievements, memberships in professional organizations _____
Explain any work done with thoroughbreds, exotic or rare animals, commercial ranching or farming _____

THREE YEAR LOSS EXPERIENCE

<u>Date</u>	<u>Losses (description and amounts paid and incurred)</u>
_____	_____
_____	_____
_____	_____

Comments _____

Applicant Signature

John C. Ferneding & Associates, Inc.
5540 Far Hills Avenue Dayton OH 45429-3249