



NCFA

Timberland Liability Application

PO Box 21627
Columbia, SC 29221
P: (803) 732-8452 hunting@assuredpartners.com

Please Complete Entire Form.
Current NCFA Membership required.

Landowner _____ Master Policy Effective Dates 08/01/2020 – 08/01/2021
Contact Name _____
Mailing Address _____
City _____ State _____ Zip Code _____
Telephone (Home / Work) _____ Cell Phone _____
Email Address _____

Table with 6 columns: # of Acres, Specific Location Address, City, County, State, Zip Code. Header: Number of acres and location of property to be insured (include an additional sheet if necessary):

How is this property used? _____

- Any commercial or business operations of any kind conducted on the premises? Yes [] No []
Any of this property leased for farming? Yes [] No []
Any of this property leased for hunting (private or commercial)? Yes [] No []
If yes to any of the above questions, do you require them to secure coverage elsewhere and provide you with a certificate of insurance naming you as an additional insured? Yes [] No []
Any of this property ever used for mining or containing gas or oil wells? Yes [] No []
Is this property fenced or posted? Yes [] No []
Any lakes or ponds on this property? Yes [] No []
Any dams, spillways, or bridges on the property? Yes [] No []
Any watercraft or docks on this property? Yes [] No []

If you answered YES to any of the above, please explain below, on the back of this form, or attach a separate page.

** This policy does not cover physical damage to, or liability in connection with buildings, structures, towers, or housing accommodations**

Any buildings, structures, towers, or housing accommodations on this property? [] Yes [] No
If yes, where are buildings, structures, towers or housing accommodations insured? _____

General Liability Coverage Options (Circle One)

** This Insurance does not cover commercial or business operations of any kind conducted on the premises **

Table with 2 columns: OPTION 1, OPTION 2. Rows include coverage amounts (\$1,000,000 vs \$2,000,000) and premium calculations based on acres.

Premiums are fully earned. Policy is non-cancellable upon inception.

Signature of Landowner _____ Date _____

To bind coverage, submit this completed application with your check payable to AssuredPartners to:
AssuredPartners, PO Box 21627, Columbia, SC 29221.

Coverage is subject to approval by AssuredPartners. Coverage is effective the later of August 1, 2020 or when payment is received, and will expire on August 1, 2021 regardless of the effective date.

Any person who knowingly and with intent to defraud any insurance company or other person, files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits fraudulent insurance act which is a crime and may subject such person to civil penalties.