



# Seed Industry Plus™

## Errors & Omissions Application



Application Completed for:  Quote Only  Policy Request

### Business Information:

Name of Insured: \_\_\_\_\_

Form of Entity:  Corporation  Partnership  Sole Proprietorship  Joint Venture

Corporation Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City or Town: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Years in Business: \_\_\_\_\_ Provincial Association #: \_\_\_\_\_

CSI Certificate No: \_\_\_\_\_ Year CSI Certified: \_\_\_\_\_

Number of Employees: Full Time \_\_\_\_\_ Part Time \_\_\_\_\_

Total Gross Seed Sales (Seed intended for planting):

Bagged Seed Sales (eg: Canola) (if applicable): \$ \_\_\_\_\_

Grain & Oilseed Sales:

Canada: \$ \_\_\_\_\_ USA: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_

Forage Seed Sales:

Canada: \$ \_\_\_\_\_ USA: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_

Custom Cleaning Receipts (if applicable): \$ \_\_\_\_\_

Custom Seed Treating Receipts (if applicable): \$ \_\_\_\_\_

Additional Insured's:  Crop Production Services Canada  FP Genetics  
 Richardson International  Other

### Insurance History:

Has applicant ever carried Errors and Omissions insurance? Yes  No

Insurer: \_\_\_\_\_ Policy #: \_\_\_\_\_ Expiry: \_\_\_\_\_ Limits: \_\_\_\_\_

Has any insurer ever declined, cancelled or restricted coverage? Yes  No

Are you aware of any occurrence, fact, circumstance, or allegation, which may give rise to a claim, whether insured or not? Yes  No



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

Any previous losses in the past 5 years?

Yes  No

Cause of Loss	Date of Loss	Amount of Loss
		\$
		\$

If you've had two or more claims, please call our office.

### Seed Processing Operations:

Employee Name	Duties – Grader or Sampler	Certification Number & Year

### Limits Required:

- |   |  |
|---|--|
| <input type="checkbox"/> \$50,000 per claim – \$100,000 aggregate<br><input type="checkbox"/> \$250,000 per claim – \$500,000 aggregate<br><input type="checkbox"/> \$500,000 per claim – \$1,000,000 aggregate | <input type="checkbox"/> \$1,000,000 per claim – \$1,000,000 aggregate<br><input type="checkbox"/> \$2,000,000 per claim – \$2,000,000 aggregate |
|---|--|

**I (We) hereby acknowledge that it is a direct consideration of the granting of insurance coverage provided by this program that all requirements and procedures set down by Canadian Seed Institute regarding grading, sale, handling, shipping and storage of seed / seed products are adhered to.**

### ***Notice Concerning Personal Information***

By signing below, you provide us with your consent for the collection, use and disclosure of your personal information, including that previously collected, for the purposes of: communicating with you; assessing your application for insurance and underwriting your policies; evaluating claims; detecting and preventing fraud; analyzing business results and acting as required or authorized by law.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Insured

***Farrell Agencies Ltd.***

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