

# Livestock Insurance Application



Contact Information					
Insured Name		ABN			
Contact Name		Phone Number			
		Mobile Number			
Email:					
Address:					
Situation Information - Details of the property location where the livestock are held.					
Situation 1					
Farm Name					
Address					
Postcode		Nearest Town			
Distance and Direction from Nearest Town					
Situation 2 (If Required)					
Farm Name					
Address					
Postcode		Nearest Town			
Distance and Direction from Nearest Town					
Situation 3 (If Required)					
Farm Name					
Address					
Postcode		Nearest Town			
Distance and Direction from Nearest Town					
Individual Animal Cover					
Sale Type	Auction			Private Sale	
Details of where the animals were purchased					
Stud / sellers name					
Purchase Date		Location			
Animal ID	Species (eg Cattle/Sheep)	Gender	Brand/ Tag No/ Tattoo	Age or Date of Birth	Insured Value (\$)
Cover Type	Mortality/Death Only			Mortality/Death and Loss of Use	
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Herd Cover				
Cover Type	Mortality/Death Cover	Defined Events - (Fire/lightning, Impact, Malicious Act(s), Aircraft, Earthquake and Explosion)		
<b>Option 1- First Loss Cover - No Co-Insurance (Blanket cover however has a higher premium rate)</b>				
Species - eg Cow/Sheep	Situation/Location	Sum Insured (\$)		
<b>Option 2 - With Co-Insurance - It is important that figures are accurate and updated regularly as the insurer can apply a co-insurance / under-insurance condition should a claim occur.</b>				
Species - eg Cow/Sheep	Animal Type - eg Cow, Steer, Ewe, Lamb ect	Number of Animals	Sum Insured / Animal (\$)	
Livestock Health Declaration				
Have any of the animals to be insured suffered from any illness, injuries, disease or undergone surgery in the past 12 months		Yes		No
If yes provide details				
Are the animals to be insured in sound health		Yes		No
If no provide details				
<b>Please not - animals to be insured under an individual animal cover purchased privately may require a vet certificate</b>				
In the past 10 years, have you or anyone else to be insured under the proposed policy:				
Had any insurance declined or cancelled, proposal rejected, renewal refused, claim rejected or any special conditions imposed on a policy.		Yes		No
Been declared bankrupt or become subject to any form of insolvency or administration (such as liquidation or receivership)		Yes		No
Had any criminal conviction(s) recorded or have any criminal charge(s) pending		Yes		No
Claims History - Please list any livestock claims that you have had in the past 5 years				
Insurer	Date of Loss	Description of Loss	Amount (\$)	
<b>I we declare that everything on this declaration to be true and correct and I/We have not withheld any relevant information. (Please sign below)</b>				
Name		Title		