



P.O. Box 27, Pitttstown, NJ 08867  
 (800) 526-1711 ph, ( 908)-735-2254 fx

**CARE, CUSTODY AND CONTROL  
 RENEWAL APPLICATION  
 FOR LEGAL LIABILITY OF NONOWNED HORSES**

INSURED/DBA		AGENT <b>Blue Bridle Insurance Agency</b>	CODE <b>3163-001</b>
PHONE NUMBER/E-MAIL ADDRESS		PHONE NUMBER <b>908-735-6362</b>	
POLICY #	RENEWAL DATE	FAX NUMBER <b>908-735-2254</b>	

Please choose one of the following for your renewal:

- Renew with my current policy limits of \$ \_\_\_\_\_ per Horse / \$ \_\_\_\_\_ Max Loss Per Year
- Change my Care/Custody/Control limits as follows: (pick one)

	Limit Per Horse	Maximum Loss per Policy Year
<input type="checkbox"/>	5,000	25,000
<input type="checkbox"/>	5,000	50,000
<input type="checkbox"/>	10,000	50,000
<input type="checkbox"/>	10,000	100,000
<input type="checkbox"/>	15,000	150,000
<input type="checkbox"/>	25,000	250,000
<input type="checkbox"/>	50,000	250,000
<input type="checkbox"/>	75,000	300,000
<input type="checkbox"/>	100,000	300,000
<input type="checkbox"/>	150,000	400,000
<input type="checkbox"/>	200,000	500,000
<input type="checkbox"/>	500,000	*1,000,000

\*Limits of \$500,000/\$1,000,000 must be referred to the Company for approval

Do you transport horses for others?  Yes  No If yes, maximum number of trips per year \_\_\_\_\_

Average number of horses per trip \_\_\_\_\_ Normal radius of operation \_\_\_\_\_ (miles)

Number of trips and destinations exceeding normal 175 mile radius \_\_\_\_\_

Are you a licensed commercial hauler/shipper?  Yes  No

The undersigned hereby applies for renewal of insurance coverage as set forth in the application and affirms that the statements and representations made here are to the best of his/her knowledge true.

INSURED'S SIGNATURE <b>x</b>	DATE / /	AGENT'S SIGNATURE	DATE / /
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**IMPORTANT - ORIGINAL APPLICATION MUST BE RETURNED  
 APPLICANT'S SIGNATURE IS NEEDED TO PROVIDE A FIRM QUOTE AND IN ORDER TO BIND COVERAGE**