



**Markel Insurance Company**  
 P.O. Box 2009, Glen Allen, VA 23058-2009  
 Telephone: (800) 446-7925 Fax: (804) 527-7784  
 Email applications to: [agapplications@markel.com](mailto:agapplications@markel.com)  
 Website: [markelhorseandfarm.com](http://markelhorseandfarm.com)

## Private Horse Owner Liability Insurance Application

The Markel Private Horse Owner Liability Policy provides personal liability, both on and off premises (coverage for third party bodily injury and/or property damage), only done by an equine which is scheduled. Only equines declared on this application will be covered, unless otherwise endorsed. This policy is designed for up to 10 equines. For 11 or more equines, a Commercial Equine Liability Policy is recommended as it will be more cost effective, gives the applicant broader coverage, and scheduling each equine is not required. Coverage is not bound until Markel approves the applicant's completed application and premium payment is received. Markel's receipt of premium does not automatically bind coverage until the completed application is approved. In the event Markel does not approve the application, the applicant's premium payment will be returned. Sample policy wording can be provided upon request. Applicant must be at least 18 years of age.

Desired effective date: \_\_\_\_\_ Markel agent name/number: \_\_\_\_\_

Named insured: \_\_\_\_\_ DBA: \_\_\_\_\_

Email: \_\_\_\_\_ Phone No.: \_\_\_\_\_ Cell No.: \_\_\_\_\_

Mailing address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Website: \_\_\_\_\_ Primary contact name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Please send the insurance policy by:  Email/Electronic delivery  
 (policy documents will be delivered to the email address provided above)  
 Mail the policy via USPS (allow 7-10 business days for receipt)

When selecting email/electronic delivery of policy documents, applicant/insured acknowledges review of Markel's electronic terms and conditions (<https://www.markel.com/insurance/markel-electronic-delivery-and-signature-consent-disclosure>) and gives Markel the permission to deliver documents electronically. Document delivery preferences can be updated at any time by a Markel representative, or by logging into a Markel portal account at <https://portal.markelinsurance.com>.

### Section 1 – Customer Information

1. Does the applicant conduct any commercial equine operations such as boarding, breeding, riding instruction, training of equines or leasing of equines to others where the applicant may or may not receive money or compensation?  
 Yes  No

Note: If applicant has a commercial operation, coverage can be provided with Markel's Commercial Equine Liability Policy. Visit [markelhorseandfarm.com](http://markelhorseandfarm.com) and complete Markel's Commercial Equine Liability Application or contact the office for a quote.

2. Type of legal entity:  individual  corporation  partnership  joint venture  LLC  organization  trust

3. Is the applicant a member of any horse related associations:  None  AHA  AQHA  APHA  ARIA  NRCHA  
 NRHA  NSBA  USDF  USEF  USHJA  Other: \_\_\_\_\_

## Section 2 – Summary of Equines

1. Total number of equines to be scheduled: \_\_\_\_\_ All owned/leased equines must be listed.

Markel's Private Horse Owner Liability Policy is designed for up to 10 equines. For 11 or more equines, a Markel Commercial Equine Liability Policy is recommended as it will be more cost effective, gives the applicant broader coverage, and scheduling each equine is not required.

- Equine name: Indicate registered or barn name. For unnamed equines, enter sire and dam's name.
- Birth year: Must be 4 digits and cannot be greater than current year.
- % Owned: Indicate the percent of ownership for each equine. For example, owned would be 100.

Equine name	Birth year	Gender	Breed	Use	Ownership	% Owned
1.		<input type="checkbox"/> Colt <input type="checkbox"/> Filly <input type="checkbox"/> Gelding <input type="checkbox"/> Mare <input type="checkbox"/> Stallion	<input type="checkbox"/> QH/Paint <input type="checkbox"/> WB/TB <input type="checkbox"/> Arab/ASB <input type="checkbox"/> Draft <input type="checkbox"/> Other	<input type="checkbox"/> Pleasure <input type="checkbox"/> Show <input type="checkbox"/> Racing <input type="checkbox"/> Breeding <input type="checkbox"/> Pulling contests <input type="checkbox"/> Driving <input type="checkbox"/> Other	<input type="checkbox"/> Owned <input type="checkbox"/> Leased from <input type="checkbox"/> Leased to	<input type="checkbox"/> 100% <input type="checkbox"/> Other: _____%
2.		<input type="checkbox"/> Colt <input type="checkbox"/> Filly <input type="checkbox"/> Gelding <input type="checkbox"/> Mare <input type="checkbox"/> Stallion	<input type="checkbox"/> QH/Paint <input type="checkbox"/> WB/TB <input type="checkbox"/> Arab/ASB <input type="checkbox"/> Draft <input type="checkbox"/> Other	<input type="checkbox"/> Pleasure <input type="checkbox"/> Show <input type="checkbox"/> Racing <input type="checkbox"/> Breeding <input type="checkbox"/> Pulling contests <input type="checkbox"/> Driving <input type="checkbox"/> Other	<input type="checkbox"/> Owned <input type="checkbox"/> Leased from <input type="checkbox"/> Leased to	<input type="checkbox"/> 100% <input type="checkbox"/> Other: _____%
3.		<input type="checkbox"/> Colt <input type="checkbox"/> Filly <input type="checkbox"/> Gelding <input type="checkbox"/> Mare <input type="checkbox"/> Stallion	<input type="checkbox"/> QH/Paint <input type="checkbox"/> WB/TB <input type="checkbox"/> Arab/ASB <input type="checkbox"/> Draft <input type="checkbox"/> Other	<input type="checkbox"/> Pleasure <input type="checkbox"/> Show <input type="checkbox"/> Racing <input type="checkbox"/> Breeding <input type="checkbox"/> Pulling contests <input type="checkbox"/> Driving <input type="checkbox"/> Other	<input type="checkbox"/> Owned <input type="checkbox"/> Leased from <input type="checkbox"/> Leased to	<input type="checkbox"/> 100% <input type="checkbox"/> Other: _____%
4.		<input type="checkbox"/> Colt <input type="checkbox"/> Filly <input type="checkbox"/> Gelding <input type="checkbox"/> Mare <input type="checkbox"/> Stallion	<input type="checkbox"/> QH/Paint <input type="checkbox"/> WB/TB <input type="checkbox"/> Arab/ASB <input type="checkbox"/> Draft <input type="checkbox"/> Other	<input type="checkbox"/> Pleasure <input type="checkbox"/> Show <input type="checkbox"/> Racing <input type="checkbox"/> Breeding <input type="checkbox"/> Pulling contests <input type="checkbox"/> Driving <input type="checkbox"/> Other	<input type="checkbox"/> Owned <input type="checkbox"/> Leased from <input type="checkbox"/> Leased to	<input type="checkbox"/> 100% <input type="checkbox"/> Other: _____%
5.		<input type="checkbox"/> Colt <input type="checkbox"/> Filly <input type="checkbox"/> Gelding <input type="checkbox"/> Mare <input type="checkbox"/> Stallion	<input type="checkbox"/> QH/Paint <input type="checkbox"/> WB/TB <input type="checkbox"/> Arab/ASB <input type="checkbox"/> Draft <input type="checkbox"/> Other	<input type="checkbox"/> Pleasure <input type="checkbox"/> Show <input type="checkbox"/> Racing <input type="checkbox"/> Breeding <input type="checkbox"/> Pulling contests <input type="checkbox"/> Driving <input type="checkbox"/> Other	<input type="checkbox"/> Owned <input type="checkbox"/> Leased from <input type="checkbox"/> Leased to	<input type="checkbox"/> 100% <input type="checkbox"/> Other: _____%
6.		<input type="checkbox"/> Colt <input type="checkbox"/> Filly <input type="checkbox"/> Gelding <input type="checkbox"/> Mare <input type="checkbox"/> Stallion	<input type="checkbox"/> QH/Paint <input type="checkbox"/> WB/TB <input type="checkbox"/> Arab/ASB <input type="checkbox"/> Draft <input type="checkbox"/> Other	<input type="checkbox"/> Pleasure <input type="checkbox"/> Show <input type="checkbox"/> Racing <input type="checkbox"/> Breeding <input type="checkbox"/> Pulling contests <input type="checkbox"/> Driving <input type="checkbox"/> Other	<input type="checkbox"/> Owned <input type="checkbox"/> Leased from <input type="checkbox"/> Leased to	<input type="checkbox"/> 100% <input type="checkbox"/> Other: _____%
7.		<input type="checkbox"/> Colt <input type="checkbox"/> Filly <input type="checkbox"/> Gelding <input type="checkbox"/> Mare <input type="checkbox"/> Stallion	<input type="checkbox"/> QH/Paint <input type="checkbox"/> WB/TB <input type="checkbox"/> Arab/ASB <input type="checkbox"/> Draft <input type="checkbox"/> Other	<input type="checkbox"/> Pleasure <input type="checkbox"/> Show <input type="checkbox"/> Racing <input type="checkbox"/> Breeding <input type="checkbox"/> Pulling contests <input type="checkbox"/> Driving <input type="checkbox"/> Other	<input type="checkbox"/> Owned <input type="checkbox"/> Leased from <input type="checkbox"/> Leased to	<input type="checkbox"/> 100% <input type="checkbox"/> Other: _____%
8.		<input type="checkbox"/> Colt <input type="checkbox"/> Filly <input type="checkbox"/> Gelding <input type="checkbox"/> Mare <input type="checkbox"/> Stallion	<input type="checkbox"/> QH/Paint <input type="checkbox"/> WB/TB <input type="checkbox"/> Arab/ASB <input type="checkbox"/> Draft <input type="checkbox"/> Other	<input type="checkbox"/> Pleasure <input type="checkbox"/> Show <input type="checkbox"/> Racing <input type="checkbox"/> Breeding <input type="checkbox"/> Pulling contests <input type="checkbox"/> Driving <input type="checkbox"/> Other	<input type="checkbox"/> Owned <input type="checkbox"/> Leased from <input type="checkbox"/> Leased to	<input type="checkbox"/> 100% <input type="checkbox"/> Other: _____%
9.		<input type="checkbox"/> Colt <input type="checkbox"/> Filly <input type="checkbox"/> Gelding <input type="checkbox"/> Mare <input type="checkbox"/> Stallion	<input type="checkbox"/> QH/Paint <input type="checkbox"/> WB/TB <input type="checkbox"/> Arab/ASB <input type="checkbox"/> Draft <input type="checkbox"/> Other	<input type="checkbox"/> Pleasure <input type="checkbox"/> Show <input type="checkbox"/> Racing <input type="checkbox"/> Breeding <input type="checkbox"/> Pulling contests <input type="checkbox"/> Driving <input type="checkbox"/> Other	<input type="checkbox"/> Owned <input type="checkbox"/> Leased from <input type="checkbox"/> Leased to	<input type="checkbox"/> 100% <input type="checkbox"/> Other: _____%
10.		<input type="checkbox"/> Colt <input type="checkbox"/> Filly <input type="checkbox"/> Gelding <input type="checkbox"/> Mare <input type="checkbox"/> Stallion	<input type="checkbox"/> QH/Paint <input type="checkbox"/> WB/TB <input type="checkbox"/> Arab/ASB <input type="checkbox"/> Draft <input type="checkbox"/> Other	<input type="checkbox"/> Pleasure <input type="checkbox"/> Show <input type="checkbox"/> Racing <input type="checkbox"/> Breeding <input type="checkbox"/> Pulling contests <input type="checkbox"/> Driving <input type="checkbox"/> Other	<input type="checkbox"/> Owned <input type="checkbox"/> Leased from <input type="checkbox"/> Leased to	<input type="checkbox"/> 100% <input type="checkbox"/> Other: _____%

2. Does the applicant own carts or buggies used with their equines?  Yes  No If yes, how many: \_\_\_\_\_

3. Are any of the applicant's equines used for pulling contests?  Yes  No

4. Do any of the applicant's equines have a history of aggressive behavior?  Yes  No

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

5. Do any of the applicant's equines travel outside of Canada or the United States and its territories?  Yes  No

If yes: how many: \_\_\_\_\_ List the countries: \_\_\_\_\_

### Section 3 – Policy Information

Is the applicant aware of any losses resulting from their ownership or lease of an equine?  Yes  No

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

#### General Liability

Select limit of insurance (occurrence/aggregate):

- \$1,000,000/\$3,000,000 - \$295 minimum earned premium (NY only-\$265)
- \$500,000/\$1,500,000 - \$250 minimum earned premium (NY only-\$220)
- \$300,000/\$900,000 - \$230 minimum earned premium (NY only-\$175)

#### Excess Liability

Note: For extra protection and additional premium, applicant can select to add excess liability. Excess liability provides an additional layer/limit of liability insurance that will exceed the general liability limit selected on the applicant's liability policy. Markel offers additional limits up to \$5 million.

1. Would the applicant like to add excess liability to the policy?  Yes  No

2. If yes, select limit of insurance (occurrence/aggregate):  
 \$1,000,000/\$1,000,000       \$2,000,000/\$2,000,000  
 \$3,000,000/\$3,000,000     \$4,000,000/\$4,000,000     \$5,000,000/\$5,000,000

#### Payment information

Payment amount:  Full annual premium

Installments: 4-pay plan - \$5 fee added per installment (\$4 fee per installment in FL only)

Payment method:  send me an invoice  check/cash  debit card  Visa  MasterCard  Discover  Amex

Note: If anything other than 'send me an invoice' is selected, an underwriter will call to take payment over the phone.

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How did applicant hear about Markel?  Convention/conference  Industry magazine ad  Insurance magazine  Markel Sales Team  Referral  
 Website  Other: \_\_\_\_\_ Please specify: \_\_\_\_\_

**Notice of information practices:** Personal information about the applicant, including information from an investigative report, may be collected from persons other than the applicant in connection with this application for insurance and subsequent amendments and renewals. Such information as well as other personal and privileged information collected by us or our agents may in certain circumstances be disclosed to third parties without the applicant's authorization. If applicable, credit scoring information may be used to help determine either the applicant's eligibility for insurance or the premium the applicant will be charged. The applicant has the right to review the applicant's personal information in our files and can request correction of any inaccuracies. For a more detailed description of the applicant's rights and our practices regarding such information visit <https://www.markel.com/privacy-policy>. Contact your agent or broker for instructions on how to submit a request to us.

**Fraud warnings:** Applicable in AL, AR, DC, LA, MD, NM, RI, and WV: Any person who knowingly (or willfully)\* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)\* presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. \*Applies in MD only. To access state specific fraud warnings, visit our website at: <https://www.markel.com/insurance/personal-and-commercial-lines-policyholder-application-fraud-warnings>

**Agreement:** The undersigned is an authorized representative of the applicant and represents that reasonable inquiry has been made to obtain the answers to questions on this application. He/she represents that the answers are true, correct and complete to the best of his/her knowledge. The undersigned authorized representative agrees that if the information supplied on the application changes between the date of the application and the effective date of the insurance, he/she will immediately notify the insurer of such changes, and the insurer may withdraw or modify any outstanding quotations and/or authorization or agreement to bind the insurance. Signing of this application does not bind the applicant to the insurer to purchase the insurance.

Applicant's signature & date:

Licensed agent's signature:

Agent's resident license number (Florida only):

Servicing agent name: