

-
1. Name of Applicant: _____
Applicant's Web Site Address: _____
Applicant's Contact Name: _____ Applicant's Contact Phone No.: _____
Applicant's Contact Email Address: _____
2. Are you licensed for logging and lumbering in the states in which you work? ☐ Yes ☐ No
License number(s) _____
3. Number of employees (other than owners)? _____ Number of owners? _____
4. Payroll of employees (other than owners) \$ _____
5. Do you use subcontractors? ☐ Yes ☐ No
Describe work: _____

6. Do you belong to any trade associations such as AF&PA, SAF, or TOC? ☐ Yes ☐ No
If yes, which? _____
7. Do you have any saw or planing mill operations? ☐ Yes ☐ No
8. Do you own land where harvesting operations are being conducted? ☐ Yes ☐ No
Are you hired by a landowner, land developer, or general contractor? ☐ Yes ☐ No
Specify: _____
9. Do you own any forestland? ☐ Yes ☐ No
Number of acres? _____
Is forestland insured elsewhere? ☐ Yes ☐ No
10. Do you conduct skyline yarding operations or use helicopters to conduct logging operations? ☐ Yes ☐ No
11. Are fire extinguishers easily accessible on all mobile equipment? ☐ Yes ☐ No
12. What agreements have been entered into concerning the condition of the land once the logging operations are completed? _____
13. Have you posted warning signs along access roads and worksite perimeters to keep the public from trespassing in areas where timber harvesting is taking place? ☐ Yes ☐ No
14. Do you permit drivers of non-owned vehicles to assist with loading operations? ☐ Yes ☐ No
(This practice should be prohibited.)
15. Do you use explosives? ☐ Yes ☐ No
16. Are visitors and workers allowed to smoke while at the worksite? ☐ Yes ☐ No
17. Do you sell forest products (e.g., timber, shredded bark, firewood, etc.) that may have been contaminated with chemicals (e.g., herbicides, pesticides, or insecticides)? ☐ Yes ☐ No
Describe: _____
18. Do operations include any of the following:
☐ Controlled/Prescribed Burns ☐ Cruising ☐ Firefighting ☐ Forest Management Plans
☐ Forestry Service ☐ Reforestation ☐ Timber Supply ☐ Other
Describe: _____

19. Do you own or operate a crane?
Size of boom and jib? _____

☐ Yes ☐ No

FRAUD WARNING: 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 IS GUILTY OF INSURANCE FRAUD. THIS IS A CRIME AND SUBJECTS SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

(FOR NEW YORK INSUREDS: AN ACT OF INSURANCE FRAUD SHALL BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED \$5,000 AND THE STATED VALUE OF THE CLAIM FOR EACH SUCH VIOLATION.)

Applicant's Signature: _____ Date: _____

Title: _____ Producing Agent: _____