

<b>Producer</b> E-MGA P. O. Box 16569 Fernandina Beach, FL 32035-3127		<b>CANINE LIABILITY</b> <b>CANINE OWNERS LIABILITY APPLICATION</b> <b>(Occurrence form)</b>			
<b>Sub Producer</b>		<b>LIABILITY COVERAGE WILL BE RESTRICTED TO THE DIRECT BODILY INJURY / PROPERTY DAMAGE CAUSED BY THE OWNED SCHEDULED ANIMAL(S) / CANINE(S) ONLY. NOTE: PREMISES LIABILITY COVERAGE IS NOT AUTOMATICALLY INCLUDED.</b>			
		<u><b>COVERAGE IS NOT BOUND UNTIL CONFIRMED BY COMPANY</b></u>			
<b>Agency Contact Name:</b> <b>License #:</b>		<b>Phone:</b> <b>Fax:</b> <b>E-mail:</b>		<b>Carrier: Canopus US Insurance, Inc.</b> <b>Policy Number:</b> <b>Status:</b>	
<b>Applicant Name:</b> <b>Home Phone Number --</b> <b>Work phone: --</b> <b>Cell Phone</b> <b>E-mail address:</b>			<b>Mailing Address:</b>		
<b>Requested Effective Date:</b>		<b>Requested Expiration Date:</b>			
<b>REQUESTED LIMITS OF LIABILITY:</b>					
<b>Bodily Injury per occurrence</b>		<b>Bodily Injury per aggregate</b>			
<b>Bodily Injury per claim deductible</b>					
<b>Property damage limits: \$1,000 Each Occurrence / \$2,000 General Aggregate, subject to a \$250 deductible per claim</b>					
<b>TOTAL NUMBER OF CANINE(S) TO BE INSURED FOR LIABILITY?:</b>					
<b>PHYSICAL ADDRESS(ES) WHERE ANIMAL(S) ARE HOUSED/KENNELED:</b>					
<b>Location 1: Primary</b>			<b>Describe Location type (ex house, apartment, business, etc):</b>		
<b>SCHEDULE OF COVERED ANIMAL (S) TO BE INCLUDED ON THIS POLICY</b>					
<b>Animal 1:</b>					
<b>NAME</b>		<b>AGE</b>	<b>SEX</b>	<b>USE</b>	<b>DESCRIBE USE IF OTHER</b>
<b>BREED</b>		<b>WEIGHT</b>	<b>COLOR</b>	<b>TAG #</b>	<b>MICROCHIP #</b>
German Shepherd					
<b>Off Premises Coverage?</b>					
<b>Off Leash Extension?</b>					
<b>Has this dog been neutered or spayed?</b>					
<b>Is this dog kept on chain when kept at home?</b>					

REMARKS (IF ANY):

**ADDITIONAL QUESTIONS**

Named Insured: \_\_\_\_\_

ARE THERE ANY CHILDREN IN THE HOME UNDER AGE 12?

IS ANY DOG EVER TAKEN TO YOUR PLACE OF BUSINESS AND/OR USED IN ANY BUSINESS ACTIVITIES?

**ANIMAL:**

IN HOW MANY INCIDENTS HAS THIS DOG BEEN INVOLVED IN ITS LIFETIME?

ANY LOSSES OR CLAIMS (DERIVING FROM THE ABOVE INCIDENTS) IN LAST FIVE YEARS FROM THIS CANINE?

Named Insured: \_\_\_\_\_

**LIABILITY COVERAGE IS AFFORDED FOR OWNED / SCHEDULED DOG(S) / CANINE(S) ONLY.**

Applicant's signature \_\_\_\_\_

\_\_\_\_\_ Date

**NO LIABILITY COVERAGE AFFORDED FOR ANY COMMERCIAL OPERATION &/OR ACTIVITIES UNLESS SPECIFICALLY ENDORSED HERETO AND AN ADDITIONAL PREMIUM CHARGE IS MADE AND PAID BY THE ASSURED.**

**ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.**

**I UNDERSTAND AND AGREE THAT ANY MISSTATEMENT OF WARRANTY OF FACT ON THIS APPLICATION SHALL BE CONSIDERED A VIOLATION OF COVERAGE AFFORDED UNDER ANY POLICY ISSUED ON THE BASIS OF THIS APPLICATION. (THIS APPLICATION WILL BECOME PART OF ANY POLICY ISSUED AS A RESULT OF ITS SUBMISSION.)**

**POLICY IS 25% MINIMUM EARNED AT INCEPTION, UNLESS OTHERWISE STATED**

Applicant's signature \_\_\_\_\_

\_\_\_\_\_ Date

# STATEMENT OF DILIGENT EFFORT

I, \_\_\_\_\_ License #: \_\_\_\_\_  
*Name of Retail/Producing Agent*

Name of Agency: \_\_\_\_\_

Have sought to obtain:

Specific Type of Coverage \_\_\_\_\_ for

Named Insured \_\_\_\_\_ from the following  
authorized insurers currently writing this type of coverage:

(1) Authorized Insurer: \_\_\_\_\_

Person Contacted *(or indicate if obtained online declination)*: \_\_\_\_\_

Telephone Number/Email: \_\_\_\_\_ Date of Contact: \_\_\_\_\_

The reason(s) for declination by the insurer was (were) as follows *(Attach electronic declinations if applicable)*:

\_\_\_\_\_

(2) Authorized Insurer: \_\_\_\_\_

Person Contacted *(or indicate if obtained online declination)*: \_\_\_\_\_

Telephone Number/Email: \_\_\_\_\_ Date of Contact: \_\_\_\_\_

The reason(s) for declination by the insurer was (were) as follows *(Attach electronic declinations if applicable)*:

\_\_\_\_\_

(3) Authorized Insurer: \_\_\_\_\_

Person Contacted *(or indicate if obtained online declination)*: \_\_\_\_\_

Telephone Number/Email: \_\_\_\_\_ Date of Contact: \_\_\_\_\_

The reason(s) for declination by the insurer was (were) as follows *(Attach electronic declinations if applicable)*:

\_\_\_\_\_

\_\_\_\_\_  
Signature of Retail/Producing Agent

\_\_\_\_\_  
Date

*"Diligent effort" means seeking coverage from and having been rejected by at least three authorized insurers currently writing this type of coverage and documenting these rejections.*

*Surplus lines agents must verify that a diligent effort has been made by requiring a properly documented statement of diligent effort from the retail or producing agent. However, to be in compliance with the diligent effort requirement, the surplus lines agent's reliance must be reasonable under the particular circumstances surrounding the export of that particular risk. Reasonableness shall be assessed by taking into account factors which include, but are not limited to, a regularly conducted program of verification of the information provided by the retail or producing agent. Declinations must be documented on a risk-by-risk basis.*

**PLEASE READ THIS DOCUMENT CAREFULLY**

**Banned Breeds**

In some jurisdictions, **you** are banned from owning, keeping or otherwise possessing specific breeds of dogs.

This policy excludes coverage caused by a breed that is banned in the jurisdiction where the loss occurred , even if that dog is listed on the policy.

**Restricted Breeds**

In some jurisdictions, **you** are required to comply with specific rules if **you** own, keep or otherwise possess specific breeds of dogs. These rules may include, but are not limited to: registration requirements, spay/neuter requirements and posting public notices.

This policy excludes coverage caused by a breed that is restricted in the jurisdiction where the loss occurred if **you** are not in compliance with the jurisdictional requirements, even if that dog is listed on the policy.

It is **your** responsibility to be aware of the rules that apply in your jurisdiction. Failure to do so may result in a denial of a claim.

*I have read the above and acknowledge that I am aware of these policy exclusions.*

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Named Insured

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Date

## Dog Bite Prevention Awareness

1. **Spay or neuter.** This procedure can help reduce your dog's aggressive behaviors.
2. **Socialize early and often.** Introduce your puppy to situations and people as early as possible. Early socialization makes for a more relaxed adult dog. But watch for signs of stress during socialization, as it's a leading cause of aggression. Always socialize your dog under calm, positive circumstances.
3. **Hire a professional.** If your dog displays aggressive behavior, a trainer may be able to curb the problem and help the animal overcome stressors.
4. **Know your dog's stressors so you can learn to avoid them.** Understanding when your dog is stressed or fearful will help you avoid risky interactions. Signs your dog is anxious include shaking, a tucked tail, whining, pinned back ears, and panting.
5. **Know your dog's body language.** Most dogs show specific warning signs before biting; these include growling, snapping, raised fur, a rigid posture, and a stiff tail. If your dog is showing these signs, do not let others approach.
6. **Exercise your dog regularly.** This will keep your pet physically and mentally healthy and provide stimulation.
7. **Avoid disciplining your dog using physical, violent, or aggressive punishment.** Opt for positive reinforcement, such as praise and treats, before resorting to the use of aggressive punishment.
8. **Regular vet visits.** A sick or injured dog is more likely to bite.
9. **Don't let guests approach your dog while it is eating, sleeping, or caring for puppies.** Dogs in these situations are more likely to be protective and can become startled.
10. **Never leave a baby or small child along with a dog.** Children are more likely to be bitten than adults, even by their family pet.
11. **And always be alert.** If someone approaches you, ask them to wait before petting the dog. This might allow your dog to get comfortable with the new person.

**Any dog, regardless of breed or cross, can and will bite if pushed to the limits of its tolerance.** Just because your dog has not bitten someone yet, does not mean that it never will.

*I have read the above and acknowledge that I am aware of these prevention measures.*

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Named Insured

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Date