

ANIMAL SERVICES Program Supplemental Application

(Complete in addition to ACORD General Liability Application)

Name of Applicant: _____

Web site Address: _____

1. **Description of operations/services provided. Indicate annual sales for each of the following described classes:**

Description of Operations/Services	Annual Sales	Description of Operations/Services	Annual Sales	
Animal Catchers (dog, cat, chicken, etc.)		Other Training Operations: • Exotic Animal Training for Use in TV, Movie, Commercials, Videos or Theatrical Shows		
Animal Catchers—Other—Describe:				
Behavioral/Psychiatry Consultant				
Excrement and/or Carcass Removal Services			• Drug, Explosives or Firearms Detection	
Guide/Companion Animal Training		• Guard Animal Training or operations		
Hunt Dog Training		• Horse Training		
Kennels: • Breeding, Boarding or Sales		Horse Riding Instruction		
		Riding Academies		
		Animal Shows or Contests		
• Animal Adoption Services or Foster Care		Animal Rides Incl. Sleigh/Carriage Rides		
		Pony Sweeps		
• Animal Hotel and/or Pet Day Care Center		Livestock: • Auctions • Artificial Insemination Services		
• Animal Shelter			• Breeding	
• Humane Society				• Dealers
• Gift and/or Thrift Shops				
Obedience Schools		Petting Zoos		
Pet Grooming Incl. Mobile Grooming		Stables (boarding, livery or racing)		
Pet Store		Veterinarian Services		
Pet Sitters		Veterinary Hospitals or Clinics		
Pet Walkers				
Therapy Dog Training or Services				
Other—Describe:				

2. **Kennel—Breeding, Boarding or Sales, Animal Shelters, Humane Societies:** Kennel is defined as “each individual compartment” used for housing an animal. Indicate total number of kennels/compartments: _____
3. **Animal Adoption Services Including foster Care, Animal Hotels, Pet Day Care Centers:** (Not Kennel, Animal Shelters or Humane Societies): Indicate average daily number of animals under your care: _____
4. **Any other premises or operations exposures not stated in this application?** Yes No
If yes, explain: _____

5. Do you provide Therapy Dog services? Yes No
- a. Have all dogs used in this service passed the American Kennel Clubs Canine Good Citizen Test or equivalent and have additional required training to have certification/title as a Therapy Dog? Yes No
- b. Name of organization or association that has provided certification: _____

6. Check the following if you are a member of the organization:

- American Animal Hospital Association (AAHA)
- American Boarding Kennels Association (ABKA)
- American Society for the Prevention of Cruelty to Animals (ASPCA)
- American Humane Association (AHA)
- American Veterinary Medical Association (AVMA)
- Humane Society of the United States (HSUS)
- Intergrom
- National Association of Dog Obedience Instructors
- National Association of Professional Pet Sitters
- National Dog Groomers Association of America, Inc. (NDGAA)
- Pet Industry Joint advisory Council
- Society of Dog Trainers
- Other—Describe: _____

7. Are your licensed by the United States Department of Agriculture (USDA)? Yes No
License Number: _____

8. Do you follow the practices and regulations of the Animal Welfare Act? Yes No

9. a. Do you import animals? Yes No

b. Are you a licensed customs importer subject to regulation by the U.S. Department of Customs? .. Yes No

10. Kennels Breeding

Type of animal: Dog Cat Other—Describe: _____

Breed(s): _____

Number of litters sold per year: _____

Total number of animals sold per year: _____

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 commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

APPLICANT'S SIGNATURE: _____ DATE _____
(Must be signed by an active owner, partner or executive officer.)

PRODUCER'S SIGNATURE: _____ DATE _____

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