

OREGON MUTUAL INSURANCE COMPANY FARM LIABILITY COVERAGE FORM DECLARATION

Сору

POLICY NO .:

NAMED INSURED:

EFFECTIVE DATE:

DESCRIPTION OF PREMISES	
"Insured Location" No Refer to M2117F	
Unless Coverage is extended as described below, the following are not covered as farming in this policy: Retail activity (other than on-premises roadside stands selling products produced principally by the named insured); Mechanized Processing Operations.	
Retail Activity (Describe): Refer to M2072	
Mechanized Processing Operation (Describe): Refer to M2072	
IN RETURN FOR PAYMENT OF PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.	
COVERAGES PROVIDED	LIMITS OF INSURANCE
General Aggregate Limit	\$
General Aggregate Limit (Other Than Products-Completed Operations)	
Products-Completed Operations Aggregate Limit	
Each Occurrence Limit	\$
Personal and Advertising Injury Limit	\$
Damage To Premises Rented to You (Per Location) or Fire Damage Limit	\$
Medical Expense Limit (Any One Person)	
Any One Person (Except "Residence Employee")	\$
Any One "Residence Employee"	\$
Additional Coverage 2 – Damage to Property of Others	\$ 1,000
	\$
	\$
	\$
	\$
	\$
CUSTOM FARMING	
Receipts from custom "farming" operations performed by the "insured", if gr	reater than \$5,000. \$

INCIDENTAL ACTIVITIES ON THE FARM	
Description:	
Insured Location:	
RESIDENCE EMPLOYEES	
Number of "residence employees" in excess of two:	
Coverage is provided on the Additional Farm Premises indicated for which a premium is charged:	
Maintained by Named Insured*, Spouse* or Resident of Named Insured's Household (*Mandatory)	
Insured Location:	
Rented to Others	
Insured Location:	
FORMS APPLICABLE	
SEE ATTACHED FORMS LIST – M2071	