



**OREGON MUTUAL INSURANCE COMPANY  
FARM LIABILITY COVERAGE FORM DECLARATION**

M2115F (9-07)

Copy

**POLICY NUMBER:**

**EFFECTIVE DATE:**

**NAMED INSURED:**

**DESCRIPTION OF PREMISES**

"Insured Location" No.: Refer to M2117F

SAMPLE

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.

<b>COVERAGES PROVIDED</b>	<b>LIMITS OF INSURANCE</b>
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

**FORMS APPLICABLE**

SEE ATTACHED FORMS LIST – M2071