



Missouri Farm Bureau - Missouri Farmers Market Association Insurance Program

Farm Bureau Town & Country Ins. Company of Missouri
P.O. Box 658, 701 South Country Club Drive
Jefferson City Mo 65102

☐ New Applicant ☐ Change ☐ Cancellation

Name of Applicant	Type of Entity: <input type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> Other _____ <input type="checkbox"/> Partnership <input type="checkbox"/> Joint Venture <input type="checkbox"/> LLC/LLP		
Mailing Address	Effective Date	County Location	
City State Zip	Missouri Farm Bureau Membership #		

Legal Location of Applicants Farmers Market:			
Street/Highway	City	State	Zip

COVERAGE:

Commercial General Liability arising out of scope of operations of the above farmers market.

\$1,000,000	CSL EACH OCCURENCE LIMIT
\$1,000,000	PERSONAL & ADVERTISING INJURY
\$2,000,000	GENERAL AGGREGATE (OTHER THAN PRODUCTS-COMP OPS)
\$50,000	FIRE DAMAGE LIMIT - ANY ONE FIRE
\$5,000	MEDICAL EXPENSE - ANY ONE PERSON

Products/Completed Operations Liability is excluded.

Individual vendors are not covered by this program. Contact their local Farm Bureau agent if interested.

1. Are you a current member of Missouri Farm Bureau? (If "no" coverage can not be bound.) ☐ Yes ☐ No
2. Are you a current member of Missouri Farmers Market Association? (If "no" coverage can not be bound.) ☐ Yes ☐ No
3. Do you allow vendors to sell items that are not farm products that are grown or made for consumption by humans or animals? ☐ Yes ☐ No
4. Have you incurred any loss, payable by insurance or not, in the past five (5) years
If "yes" please describe _____
*** If "yes" coverage can not be bound without approval from Missouri Farm Bureau. ☐ Yes ☐ No
5. Do you require your vendors to show proof of insurance? ☐ Yes ☐ No
6. Do you operate outside the state of Missouri? ☐ Yes ☐ No
7. Are there any unusual hazards located on the premises? ☐ Yes ☐ No
8. Do you provide/sponsor special amusement events? If "yes" please describe: _____ ☐ Yes ☐ No

Additional Insureds – Lessors of your premise:

Only lessors of your premises are eligible for coverage as an Additional Insured.

Additional Insured – Controlling Interest:

Your controlling interest must be a legal entity (Additional \$10 charge applies).

Fair Credit Reporting Act Notice: In addition to routine verification of information pertinent to the insurance applied for, the company may have an investigator consumer report made whereby information is obtained through personal interviews with your neighbors, friends or others with whom you are acquainted. This inquiry includes information as to your character, general reputation, personal characteristics, and mode of living. You have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of the investigation.

**Please mail to: Brad Gray, MFMA treasurer
710 South Hickory Street
Mt Vernon, MO 65712**

Signature of Applicant _____ Date _____
Telephone #: _____ - _____
Email Address: _____