



Application for
CANINE LEGAL LIABILITY INSURANCE
 KINGSTONE INSURANCE COMPANY
 15 Joys Lane – Kingston, New York 12401

This is an application for Canine Legal Liability Insurance. Upon acceptance by Kingstone Insurance Company, a policy will be issued. **This is not a binder.**

Producer's Name: _____

Limits of Liability: \$100,000 CSL Deductible: \$500
 \$250,000 CSL

Producer's Address: _____

Policy Period: ____/____/____ - ____/____/____

<p>1. Applicant's name:</p> <hr/> <p>2. Applicant's address:</p> <hr/> <p>3. Is applicant the dog owner? <input type="radio"/> Yes <input type="radio"/> No</p> <hr/> <p>4. Address where dog is primarily housed:</p> <hr/> <p>5. Is the location where the dog is primarily housed a private residence? <input type="radio"/> Yes <input type="radio"/> No</p> <hr/> <p>6. Is the address where the dog is primarily housed owned by the applicant? <input type="radio"/> Yes <input type="radio"/> No</p> <hr/> <p>7. List names and relationships of all persons who regularly handle, feed, or care for the dog.</p> <hr/> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 20%;">8. Description of dog/s:</th> <th style="width: 30%;">Dog 1:</th> <th style="width: 30%;">Dog 2:</th> </tr> <tr> <td style="padding: 5px;"> 1. Color: _____ / _____ 2. Weight: _____ / _____ 3. Height: _____ / _____ 4. Name: _____ / _____ 5. Marks: _____ / _____ 6. Age: _____ / _____ 7. Breed: _____ / _____ 8. Gender: _____ / _____ </td> <td></td> <td></td> </tr> </table> <hr/> <p>9. Does dog have a microchip implant? <input type="radio"/> Yes <input type="radio"/> No</p> <p>What is the implant number?</p> <hr/> <p>10. How far is the nearest school, park or playground to the premises where the dog is housed?</p> <hr/>	8. Description of dog/s:	Dog 1:	Dog 2:	1. Color: _____ / _____ 2. Weight: _____ / _____ 3. Height: _____ / _____ 4. Name: _____ / _____ 5. Marks: _____ / _____ 6. Age: _____ / _____ 7. Breed: _____ / _____ 8. Gender: _____ / _____			<p>11. Applicant's daytime phone #:</p> <p>Applicant's evening phone #:</p> <hr/> <p>12. Dog's license number and licensing jurisdiction:</p> <hr/> <p>13. From where did you first obtain the dog?</p> <hr/> <p>14. How long has dog been owned by the applicant?</p> <hr/> <p>15. Dog's veterinarian's name:</p> <hr/> <p>16. Dog's veterinarian's address:</p> <p>Dog's veterinarian's phone #:</p> <hr/> <p>17. Does the dog have all of its required and recommended vaccinations? <input type="radio"/> Yes <input type="radio"/> No</p> <hr/> <p>18. When was the dog's last visit to the veterinarian?</p> <p>What was the purpose of the visit?</p> <p>Does the dog have any medical conditions? <input type="radio"/> Yes <input type="radio"/> No</p> <p>Has the dog been spayed or neutered? <input type="radio"/> Yes <input type="radio"/> No</p> <hr/> <p>19. How many dogs in total are located on the premises where the dog is housed?</p> <hr/> <p>20. Is a "beware of dog" sign posted at the premises where the dog is housed? <input type="radio"/> Yes <input type="radio"/> No</p> <p>If yes, explain why.</p> <hr/>
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21. Do you operate a business from your residence? Yes No

If yes, do customers visit the premises? Yes No

If yes, how often?

22. Is the dog used in the operation of your business whether a business run from home or otherwise? Yes No

If yes, describe the business and the dog's role.

23. Has the dog ever been used in racing contests? Yes No

Has the dog ever been used for hunting? Yes No

24. Has the dog ever been used as a police dog or security dog? Yes No

25. Has the dog ever bitten another dog? Yes No

If yes, explain the circumstances surrounding the bite.

Was the bite provoked? Yes No

Describe the nature and severity of the bite.

26. Has the dog ever damaged property belonging to another person? Yes No

If yes, describe the property and damage.

27. Who walks the dog?

When being walked, how is the dog restrained (muzzle, leash, etc)?

28. Has the dog ever exhibited aggressive or vicious propensities including but not limited to biting a person or property? Yes No

If yes, describe.

Has the dog ever been the subject of a claim or lawsuit? Yes No

If yes, explain.

29. Is the dog used primarily as a guard dog? Yes No

Has the dog ever been trained as a guard dog? Yes No

30. Has the dog ever been trained by a professional trainer? Yes No

If yes, indicate the trainer's name.

If the dog was trained, what was the purpose of the training?

31. Has the dog ever been trained to attack on command? Yes No

32. Has the dog ever bitten a human? Yes No

If yes, explain the circumstances surrounding the bite.

Was the bite provoked? Yes No

Describe the nature and severity of the bite.

What part of the body was bitten?

33. Identify the names of all persons bitten by the dog:

34. When the dog is left outside the premises, is it restrained in a kennel, pen, or cage? Yes No

When the dog is left outside the premises, is it left in an area enclosed by a fence? Yes No

If applicable, how high is the fence?

Applicant's Statement: I have read the above application and any attachments. I declare that the information in them is true, complete and correct to the best of my knowledge and belief. This information is being offered to the company as an inducement to issue the policy for which I am applying. I have also read and understand the fraud statement below.

Applicant's Signature: _____ **Date:** _____

Producer's Signature: _____

Any person who knowingly and with intent to defraud any insurance company or another 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 the person to criminal and substantial civil penalties.