FOAM LIABILITY INSURANCE QUESTIONNAIRE

Make insurance check payable to Bissell Agency.

Mail insurance questionnaire, insurance check, FOAM application, & FOAM check to:

Bissell Agency, 4055 Valley Commons Drive, Unit A, Bozeman MT 59718

Year _____

Business Name _____ (circle one) Corporation Partnership Other

Applicant Name _____ Outfitter/Guide #_____

Mailing Address _____ City _____ State___ Zip _____

Phone _____ Email _____ Website _____

INSURANCE LIMITS

$1,000,000 limit per Outfitter or Guide for each liability event
$2,000,000 yearly total liability limit per Outfitter or Guide for all liability events
$5,000 client non-fault medical limit per event
$0 deductible for bodily injury liability (client injury/death)
$250 deductible for property damage/loss liability (client gear)

ANNUAL RATES (Premiums cannot be pro-rated. Refunds subject to agency discretion.)

		Rate Calculation	
Outfitter	**$400**	_____	
Guide	**$400**	_____	
Outfitter's Employee guide(s)	#____ x $150	_____	
If employee, *you MUST enter outfitter's name* _____			
Optional Coverages			
Bird hunting	$200	_____	
Big Game hunting (non-horseback)	$200	_____	
Motorized boats (any boat with motor)	$107	_____	**Use Optional Insurance form!**
Rental boats, non-motorized	#_____ x $75	_____	
TOTAL Premium (MUST BE RECEIVED before certificate can be issued)		_____	

ADDITONAL INSUREDS

Provide name & address of each governmental agency or business/individual you want as an additional insured (AI) on your policy.
Except for the Board of Outfitters, AI's will be sent an additional insured form listing them on your policy.

OUTFITTERS automatically receive an AI for Montana Board of Outfitters, but are responsible for sending AI certificate to MBO!

Name: _____ Address: _____
_____ _____
Name: _____ Address: _____
_____ _____
Name: _____ Address: _____
_____ _____

Use separate list for more names/addresses

ACTIVITIES *NOT* COVERED UNDER POLICY:

The FOAM liability insurance policy is intended to cover fishing operations and related services ONLY. If you provide any of the activities below and want additional coverage, the activity or activities MUST be insured separately. Contact Bissell Agency for more information.

* Equine liability
* Retail operations, including internet sales
* Saltwater fishing or guiding
* Lodging Operations
*
* Non-motorized boats over 26 ft. in length
* Outfitter/guide gear (boat, trailer, boat gear, rods, reels, flies, etc.) **Optional gear coverage available; Use Optional Insurance form.**

ACKNOWLEDGEMENT OF RISK FORMS AREN'T REQUIRED, BUT THEY ARE RECOMMENDED! Signed forms should be available in event of a claim. Keep forms for 3 years after client signs. These signed forms augment Montana law regarding acknowledgement of risk.

The coverage information contained in this questionnaire is only a general description and is not a statement of contract. In the event of a claim, any coverage provided by the Insurer is subject to Terms, Conditions, and Exclusions in actual policy. 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 material thereto, commits a fraudulent insurance act which is a crime and may subject such person to criminal and civil penalties.

Signature _____ Date _____

Your insurance is effective upon receipt of premium payment, payment of FOAM dues, and insurer approval

Art Hoffart, CIC
(406) 586-6230, Ext. 1
(406) 580-6230 Cell

BISSELL INSURANCE AGENCY
4055 Valley Commons Drive, Unit A
Bozeman, MT 58718
800-815-6230