



# The Bramlett Agency

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## PRESCRIBED BURNING LIABILITY APPLICATION

Landowner Name \_\_\_\_\_  
Fed. ID/SSN \_\_\_\_\_ Contact Name \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone \_\_\_\_\_ Mobile \_\_\_\_\_ Fax \_\_\_\_\_  
Location Address \_\_\_\_\_  
Desired Effective Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

### Burn Information

Prescribed burn must follow state law. Most states have a minimum requirement of:

- A) a written plan to start and control the prescribed burn is prepared and witnessed or notarized prior to the burning
- B) burn must be conducted in accordance with state law and rules established for prescribed burns

### Coverage

Commercial General Liability (Occurrence Form)      Damage & Bodily Injury per claim

### Loss History

Do you have knowledge of any incident that may lead to a claim?    Yes \_\_\_\_    No \_\_\_\_

Date	Description of Incident	Amount Paid/Reserved

If Yes, please describe:

### Additional Insured (if necessary use another sheet of paper)

Name	Complete Address	Interest	Location of Property

### Underwriting Information for Burn Manager/Consultant

1.	Number of Direct Employees		
2.	Does Applicant have required burn plan prepared and attached?	Yes ____	No ____

The applicant's signature is required if coverage is to be provided, even on an "If Any" basis, in any or all of the above states or when state insurance regulations require applicants to sign all insurance applications.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Name of Agency \_\_\_\_\_

Signature of Agent \_\_\_\_\_