

# Seedsmen Errors & Omissions

## SECTION 1: APPLICANT INFORMATION

- 1. Name of Applicant: \_\_\_\_\_
- 2. Principal: \_\_\_\_\_
- 3. Mailing Address of Applicant: \_\_\_\_\_
- 4. Date Applicant Established: \_\_\_\_\_
- 5. Business Phone: \_\_\_\_\_ Residence Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_
- 6. Email: \_\_\_\_\_ Fax: \_\_\_\_\_ Website: \_\_\_\_\_

## SECTION 2: UNDERWRITING INFORMATION

- 1. What seed trade association is the firm in good standing with?  
 ASTA  Others (please show name): \_\_\_\_\_  
**If others**, do any of these associations have binding arbitration rules?  Yes  No
- 2. Is the Applicant a co-operative or a member of a co-operative?  Yes  No
- 3. Is the Applicant a:
 

Primary Producer of Seed?	<input type="radio"/> Yes <input type="radio"/> No
Seed Processor?	<input type="radio"/> Yes <input type="radio"/> No
Seed Re-Packager?	<input type="radio"/> Yes <input type="radio"/> No
Distributor of Seed pre-packaged by third party(ies)?	<input type="radio"/> Yes <input type="radio"/> No
Other (Please explain): _____	<input type="radio"/> Yes <input type="radio"/> No
- 4. Do you use a standard limitation of liability to limit your exposure?  Yes  No  
**If no**, please explain: \_\_\_\_\_  
 Does your limitation of liability appear on all your seed tags, bags, labels and invoices?  Yes  No
- 5. Do you grow experimental stock seed?  Yes  No  
*(Defined as breeder, foundation or registered seed prior to commercial sales)*  
**If yes**, do you allow any retention of experimental stock/seed by your growers for resale?  Yes  No  
**If yes**, please explain the terms of contract, percentage of retention, dollar value of each category and please attach a copy of the contract agreement used.

6. Do you have any involvement in research or development of "transgenic varieties"?  Yes  No

**If yes**, can you please describe in full and confirm whether such seeds have been approved by any regulatory authority (i.e. APHIS, FDA, EPA, etc.):

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Do you currently sell any transgenic varieties?  Yes  No

**If yes**, can you please identify and describe the types or kinds of transgenic seeds sold and set forth your dollar sales volume for each type or kind of transgenic seed sold:

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7. Who is responsible for your Quality Control Program? \_\_\_\_\_

To who does this person report to? \_\_\_\_\_

What training has this person had in quality control? \_\_\_\_\_

Please describe briefly your Quality Control Program (*please include sampling procedures and limits of confidence used*):

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8. Do you deal in green bean sales?  Yes  No

**If yes**, please advise source of seed: \_\_\_\_\_

Please advise if seeds are exposed to Halo blight and what, if any, eradication measure you have taken:

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## 9. Please breakdown your seed sales by kind of seed and source, for the last 12 months:

**Instructions:**

**For Column A:** Please show total sales excluding Categories B, C and D below.

**For Column B:** Please show total sales of all seed grown by you, for others, under contract as Contract Grown Seeds.

Are you responsible for the quality control of this category?  Yes  No

**For Column C:** Show only income from performing custom conditioning services for others, not the value of the seed conditioned.

**For Column D:** Show only the dollar value of your distributor's sales margin of seed sold using the supplier's packaging and labels (i.e. the difference between the cost to you and your sales). Seed requiring re-testing before distribution should be declared as Category A sales, above.

Heading	A	B	C	D
	Total Seed Sales, excluding B, C & D	Total Sales of Contract Grown Seeds	Income from Seeds Custom Conditioned for Others	Distributor Sales Margin (See above)
Watermelon				
Tomato				
Lettuce, Peppers, Brassica, Cucurbits, Melons (other than Watermelon)				
Other Garden Seed (Please attach list)				
Home Gardeners' Packets				
Flower Seed				
Seed Potatoes: Certified, Non-Certified				
Rice				
Sugar Beets				
Wheat, Barley, Oats, Rye, Soybean, Hybrid Corn, Sweet Corn, Grain Sorghum, Hybrid Sunflowers, Canola, Cotton, Edible Dry Beans				
Grass Seed (pure varieties and mixtures), Blue Grass, Fescue, Forage Sorghum, Alfalfa				
All Other Seeds (Please attach list)				



**Primary Producers/Processors, please answer all questions below:**

10. What parameters are used to determine a specific lot of seed? \_\_\_\_\_  
How are lots separated until varietal purity, germination and weed seed content have been determined?  
\_\_\_\_\_
11. Are grow-out tests of seed lots conducted when such tests are required to determine quality?  Yes  No  
**If yes**, on which crops and where:  
\_\_\_\_\_
12. Do you determine that a grow-out lot of hybrid seed conforms to the Federal Seed Act Regulations regarding percentage requirements of hybridized seeds?  Yes  No  
**If no**, please explain:  
\_\_\_\_\_
13. If seed is grown for you by contract growers, whose crew rogues the production field?  
\_\_\_\_\_  
At what times do your representatives examine the planting and growing of the production field?  
\_\_\_\_\_  
What experience have these representatives had in seed production?  
\_\_\_\_\_  
If field inspection or rogueing raises questions as to the acceptability of the varietal purity of the lot, what procedures are followed to correct any indicated problem before the seed is marketed?  
\_\_\_\_\_
14. In your production of cross-pollinated seeds, do you meet the isolation, rogueing and pollen control requirements recommended by regulatory officials, extension departments and Universities?  Yes  No  
For self-pollinated crops, what kind of isolation measures do you observe to prevent accidental mechanical contamination of the crop?  
\_\_\_\_\_

**Distributors, Re-Packagers, Secondary Processors, please provide a copy of your standard order, listing specifications required in the product purchased from a primary producer/processor.**

15. In your processing plant(s), which have more than one processing line, do you ever process more than one variety of a given kind of seed at the same time?  Yes  No  
**If yes**, how do you ensure mechanical mixtures are prevented?  
\_\_\_\_\_
16. Does the Applicant maintain a private laboratory staffed with a senior analyst?  Yes  No  
**If no**, does the Applicant use the facilities of a qualified commercial laboratory?  Yes  No  
**If yes**, please provide name of the laboratory used: \_\_\_\_\_



Are your germination tests made according to the procedures prescribed by the Association of Official Seed Analysts?  Yes  No

If **no**, please explain the procedures followed:

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17. If germination (plus hard seed percentage, if applicable) is less than the higher of 75% or five percentage points above the minimum specified for the seed in the Federal Seed Act regulations, do you conduct a seedling vigor test?  Yes  No

How frequently do you retest germination of seed lots?

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18. Do you keep a representative sample from each lot of seed and store the sample under storage conditions equivalent to those for your seed inventory storage, until a year after the lot has been entirely sold or disposed of?  Yes  No

19. What requirements as to germination percentage, origin and age of seed do you observe in blending seed?
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What requirements are observed in dealing with formula mixes (i.e. pasture mixes, lawn mixes, alfalfa blends, etc.)?

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20. Are you involved in the sale of Potato Seeds?  Yes  No

If **yes**, please answer the questions on the attached "Potato Seedsmen Supplemental Questionnaire".



### SECTION 3: INSURANCE & LOSS HISTORY INFORMATION

1. Previous Insurer: \_\_\_\_\_ Policy # \_\_\_\_\_  
 Expiring Premium: \_\_\_\_\_ Sum Insured: \_\_\_\_\_  
 Retroactive Date: \_\_\_\_\_ Deductible: \_\_\_\_\_

2. Is the above Insurer offering renewal?  Yes  No

If **yes**, renewing premium: \_\_\_\_\_

If **no**, please advise why not:

3. Claims Experience. Describe all liability losses or incidents paid, or reserved, since the Insured has been working in his field (include dates and amounts):

4. Effective Date: \_\_\_\_\_

5. Amount of Indemnity Required:  \$250,000  \$500,000  \$1,000,000  Other: \_\_\_\_\_

Deductible Required:  \$2,500  \$5,000  Other: \_\_\_\_\_

Do you desire coverage to be extended to include "multiple claims coverage"?  Yes  No

**"Multiple Claims" means more than one claim arising from a single act, error or omission, in respect of one lot of seed. "Multiple Claims Coverage" means that if more than 3 claims are made in respect of one lot, the Insured shall bear only the first 3 deductible. This coverage is available for an additional premium.**

### SECTION 4: OTHER INFORMATION

Please provide any other information you feel would assist in the evaluation of your application:



**SECTION 5: DECLARATION**

It is understood and agreed that the completion of this application shall not be binding either to the proposed insured or to Risk-Can Underwriting Managers until accepted by Risk-Can Underwriting Managers, but that the information contained herein shall be the basis of the contract should a policy be issued.

I declare that the statements made in this application are complete and true to the best of my knowledge. I understand that the Application Form will form part of the insurance policy. I acknowledge that if, at any time of claim, it is discovered that any question in this application is not answered truthfully, accurately and completely, it may result in the non-payment of any claim and/or my coverage will be made null and void.

Your privacy is protected: The insurance coverage you are applying for is provided to you by Risk-Can Underwriting Managers and Risk-Can Underwriting Managers will collect, use and disclose the personal information, which you give, for the purpose of providing you with insurance services. Your information may be disclosed to others in the credit services, investigative and/or insurance fields as necessary to underwrite and administer this insurance and to pay any benefits.

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Applicant's Name (Please print)

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Title/Position

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Signature of Applicant

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Date (MM/DD/YYYY)

**BROKER CONTACT INFORMATION**

Agent Name: \_\_\_\_\_ Brokerage Name: \_\_\_\_\_  
Email: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ City / Province: \_\_\_\_\_  
Fax: \_\_\_\_\_ Postal Code: \_\_\_\_\_

## ▶ POTATO SEEDSMEN SUPPLEMENTAL QUESTIONNAIRE

1. What classes of seed potatoes do you grow?

Tuber Unit Foundation?  Yes  No % of Total? \_\_\_\_\_  
 Mass Plant Foundation?  Yes  No % of Total? \_\_\_\_\_  
 First Year Certified?  Yes  No % of Total? \_\_\_\_\_  
 Second Year Certified?  Yes  No % of Total? \_\_\_\_\_  
 Third Year Certified?  Yes  No % of Total? \_\_\_\_\_

2. Do you participate in a State Certification Program?  Yes  No

3. Do you do any cutting of potatoes as part of your sales or distribution?  Yes  No

**If yes**, what measures do you employ to disinfect equipment prior to cutting any new crop?

Do you wash seed potatoes before sale?  Yes  No

**If yes**, do you use a disinfectant?  Yes  No

**If yes**, what disinfectant and rate of application do you use?

4. What type of container do you use in shipping the seed potatoes? \_\_\_\_\_

Are containers/bags always new?  Yes  No

Are the containers or cartage in which the bags of seed potatoes are shipped always disinfected or decontaminated prior to shipment?  Yes  No

5. Please provide a brief description of how seed potatoes are stored:

6. How is temperature and humidity controlled and is there a back-up system?

7. Do you store any other commodities in the area of seed potato storage?  Yes  No

**If yes**, what other commodities are stored in this area?