



Brown & Brown of Garden City, Inc.  
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# HAYRIDE SUPPLEMENTAL APPLICATION

Name of Insured: \_\_\_\_\_

1. Describe the wagon(s) used in the hayride (number owned/rented, construction material, wheel type, seating capacity, age) \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2. Is there a maintenance / inspection program in place for vehicles / wagons?  Yes  No

If Yes, please describe: \_\_\_\_\_  
 \_\_\_\_\_

3. How is the wagon drawn (horse, tractor)? \_\_\_\_\_

Are the pulling devices  owned – or –  leased

(Send copy of contract if leased).

4. If horses are pulling wagons, please describe the safety program for passenger loading / unloading. \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

5. Are there any night rides?  Yes  No

If Yes, what type of lights, etc. are used? \_\_\_\_\_

6. Is throwing the hay or other materials permitted during the ride?  Yes  No

7. Describe the experience of the employees. \_\_\_\_\_

\_\_\_\_\_  
 What type of training / orientation takes place? \_\_\_\_\_  
 \_\_\_\_\_

What type of first-aid training is provided? \_\_\_\_\_  
 \_\_\_\_\_

8. Are patrons required to remain seated throughout the ride?  Yes  No

9. Are rules & regulations clearly posted?  Yes  No

10. In addition to the driver, how many employees are used for each wagon for patron supervision? \_\_\_\_\_

I understand that the insurance company in determining whether to provide a quotation for insurance coverage will rely on the information contained in the application and all other information being submitted. I hereby warrant, represent and confirm that, to the best of my knowledge, all information provided is complete, true and correct.

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

Date (MM/DD/YY) \_\_\_\_\_