



## APPLICATION FOR LIVESTOCK MORTALITY INSURANCE

[ ] COMMERCIAL COVER [ ] NON-COMMERCIAL COVER [ ] SPECIAL COVER

NAME OF APPLICANT : \_\_\_\_\_  
ADDRESS : \_\_\_\_\_  
CONTACT NO. : \_\_\_\_\_ DATE OF BIRTH : \_\_\_\_\_  
MARITAL STATUS : \_\_\_\_\_ IP  TRIBE: \_\_\_\_\_  
NAME OF SPOUSE : \_\_\_\_\_ GENDER : \_\_\_\_\_

Hereby proposes for insurance coverage of animal/s listed below under the terms and conditions of the General Provision for PCIC Livestock Mortality Insurance for a period of \_\_\_\_\_ months/year from noon of \_\_\_\_\_ to noon of \_\_\_\_\_ while in the proponent's farms located at \_\_\_\_\_.

### I. Type of Animal/s :

[ ] Cattle [ ] Carabao [ ] Swine [ ] Poultry  
[ ] Horse [ ] Goat [ ] Other Specify \_\_\_\_\_

### II. Purpose

[ ] Fattening [ ] Draft [ ] Broilers [ ] Pullets  
[ ] Breeding [ ] Milking [ ] Layers [ ] Parent Stock

### III. Description of Animals to be Insured

Source of Stock : \_\_\_\_\_  
Breed : \_\_\_\_\_ Brand: \_\_\_\_\_  
Ear Mark/Tag : \_\_\_\_\_ Basic Color: \_\_\_\_\_

No. of Heads/Birds: \_\_\_\_\_ No. of Housing : \_\_\_\_\_  
Male : \_\_\_\_\_ Age: \_\_\_\_\_ No. of Birds per Housing Unit: \_\_\_\_\_  
Female : \_\_\_\_\_ Age: \_\_\_\_\_ Date of Purchase : \_\_\_\_\_

**Total Number of Heads for Enrollment** : \_\_\_\_\_

For Cattle and Carabao only:

Certificate of Ownership of Large Cattle No.: \_\_\_\_\_

Certificate of Transfer of Large Cattle No.: \_\_\_\_\_

### IV. Coverage

1. Desired Sum Insured per Head: Php \_\_\_\_\_
2. Total Sum Insured : Php \_\_\_\_\_
3. Extended Coverage for Epidemic Diseases:
  - 3.1 \_\_\_\_\_
  - 3.2 \_\_\_\_\_
  - 3.3 \_\_\_\_\_

**ASSIGNEE/LOSS PAYEE** : \_\_\_\_\_  
Address : \_\_\_\_\_  
Contact No. : \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

**CERTIFIED CORRECT:**

\_\_\_\_\_  
Signature Over Printed Name of  
Agricultural Technologist

\_\_\_\_\_  
Date



**Republic of the Philippines**  
**Department of Agriculture**  
**PHILIPPINE CROP INSURANCE CORPORATION**  
Regional Office No. IV