

## PROPOSAL FORM – HORSES

### 1.0 Data and general information about the insured

1.1 Name and address of the insured

1.2 Exact location (or geographical co-ordinates) of the farm

1.3 Size of stud farm in ha.

1.4 Details on the surroundings (topography, population, similar farms in a 20 km range)

1.5 How long has the insured been in stud farming business?

1.6 When did the stud farm start its operations?

Farm management

1.7 Experience and qualification of owner/deputy

	Name	Qualifications	Additional Training	No of Years on Farm
Farm Manager				
His Deputy				

### 1.1 Experience and qualification of major staff

#### a) Management personnel

Name	Qualification	Additional Training	No of Years on Farm

#### b) Supervisory personnel

Name	Qualification	Additional Training	No of Years on Farm

#### c) Workforce overview

	Management	Supervisory	Security	General Workers	Total
No of Persons					

Horses - general

Animals to insure (fill in where appropriate)

Age group and use*	Sex (m/f)	Number	Breed	Origin of young animals (give details)
Total no. of horses on farm				

2.2. Is the supplier of the young animals a professional breeder or an agent/dealer?

2.3. Does the supplier provide an indemnification for losses

a). Encountered during transport? Yes ☐ No ☐

b). Happening during the adaptation phase? Yes ☐ No ☐

2.4 Are newly arriving animals kept under quarantine or otherwise apart?

If yes, specify for how long and where?

2.5 Herd control

Earmark : Yes ☐ No ☐ Brandmark : Yes ☐ No ☐

Magnetic transponder (chip) : Yes ☐ No ☐ Passport (chip) Yes ☐ No ☐

other type (specify) : \_\_\_\_\_

At what intervals are animals counted? \_\_\_\_\_

### 2.6 Daily activity

How many hours on average do the horses spend per day:

In closed stables? : \_\_\_\_\_ h In open stables? : \_\_\_\_\_ h

In paddocks? : \_\_\_\_\_ h Race training? : \_\_\_\_\_ h

On pastures (distance from farm?) : \_\_\_\_\_ h ..... kms away

Other training? (specify): \_\_\_\_\_ h

2.7 Feeding practice/ regime (feeding intervals/day, manual or automatic, supply systems etc)

2.8 Supplier of feed and fodder (own production, import etc.)

### 3.0 Bloodstock and health

3.1 State major health problems encountered during the breeding of horses

3.2 Are health certificates available for young animals?

3.3 Appointed veterinary surgeon for the stud farm

Full name: \_\_\_\_\_

Qualifications/education: \_\_\_\_\_

Years responsible for this farm: \_\_\_\_\_

Time required to reach the farm: \_\_\_\_\_

3.4 Vaccinations required by national legislation (list or attach copy of official requirements)

3.5 What kind of vaccination program is applied for the different age groups of horses kept/raised (as indicated under "age group" in 3.1)?

3.6 What other treatments do the horses receive? Specify.

Age Group	Vaccination Program

3.7 When were the last serological tests made? (in case of positive results, please state disease(s) detected)

3.8 Are additives or antibiotics added to the feed and/or drinking water of the horses?

If "yes", state which products are used where.

3.9 What is the natural mortality for the different age groups of horses (as indicated under 3.1)?

Age Group	Vaccination Program

3.10 Loss history (for the last 5 years, cause, value, number and type of animal)

### 4.0 Risk management

4.1 Details on public access (access roads, restricted access, fences)

4.2 Surveillance (measures taken to control/prevent unlawful access to the outside work ing 3 hours)

4.3 Specific measures against theft

4.4 State precautions, measures taken against fire

4.5 Distance to next public fire brigade?

4.6 Any emergency power supply? If "yes", explain alarm system(s).

4.7 Additional safety precautions implemented?

4.8 Transport

If horses are transported, state: \_\_\_\_\_

Means of transport: \_\_\_\_\_

Distances covered: \_\_\_\_\_

Are drivers known (for road transport) \_\_\_\_\_

## 5.0 Insurance

### 5.1 Calculating the Total Sum Insured (TSI)

Please supply separate tables for the different groups containing the following headings:

Name and Identification of horse group (as indicated in 3.1)	Sex (m/f)	Age (years)	Value*
			Total value* (of group)

NAME	AMOUNT
KLIFT	150
KVA	100

#### Administration Cost

Total Sum Insured+ Administration cost	Total Sum Insured + admin cost(TSI)*
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### 5.2 Past insurance

Have the animals been insured in the past?

Yes ☐ No ☐

If "yes", by whom and for what period?

### 6.0 Financial support

Does your government subsidize the insurance you apply for?

Yes ☐ No ☐

If "yes", please specify.

Does your government indemnify losses caused by forced

slaughtering as epizootic measure (infected animals, as prevention)? Yes ☐ No ☐

If "yes", with what is the sum of indemnification for the different types of animals?

### Declaration

I/we declare and warrant that the above answers/information in every respect is true and correct and I/we have not withheld any information likely to affect the acceptance of this proposal.

Date and place: \_\_\_\_\_

Name and signature of proposer/insured: \_\_\_\_\_

(list enclosures like plans, photos etc.) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### MODE OF PAYMENT (Tick One):

1. CASH ☐ 2. CHECK OFF ☐

KENYA LIVESTOCK FINANCE TRUST  
P O BOX 66717 00800,  
Westlands, Nairobi - Kenya.  
Tel. 020 2496915/ 0728-416048 / 0734-148717  
Email : [klift2009@gmail.com](mailto:klift2009@gmail.com) or / [info@klift.org](mailto:info@klift.org)  
website: [www.klift.org](http://www.klift.org)

**KLIFT -- Physical Address**  
K-LIFT Offices are Located  
Veterinary Laboratories Kabete  
Off Nairobi-Nakuru Highway...



horses, Pets and commercial dogs	
Scope of Cover	<ul style="list-style-type: none"><li>* Accidental death due to lightning, internal &amp; external injury and pregnancy, fire,</li><li>* Windstorm, snakebites, flooding</li><li>* Diseases of terminal nature</li><li>* Emergency slaughter on a veterinary advice</li><li>* Theft by use of force when in paddock or under zero grazing</li><li>* Accidental transit death within a radius of 250 kms</li><li>* Calving complications</li><li>* Epidemics</li></ul>
Quote Requirements	<ul style="list-style-type: none"><li>* Submit duly completed application form</li><li>* Premium payment</li><li>* Current veterinary and valuation report from local livestock officer</li><li>* Identification tags, tracking device or tattoo for all insured livestock</li><li>* Horses below 25 years and above 3 months.</li></ul>
Key Exclusions	<ul style="list-style-type: none"><li>* Wilful misconduct and or intentional destruction without insurer's consent (except on humane grounds with the consent of a qualified veterinary practitioner)</li><li>* Feed poisoning or poisoning through spray</li><li>* Prior accidents or diseases (existing before going on cover)</li><li>* Mysterious disappearances or unaccountable losses</li><li>* Losses occurring while on culling</li><li>* Theft in areas prone to cattle rustling and banditry.</li><li>* Livestock on exhibitions and shows (unless specifically extended on request)</li><li>* Famine and malnutrition</li><li>* Medical treatment by unqualified practitioner</li><li>* Impotence and infertility</li><li>* Congenital defects (defects the animal is born with)</li><li>* Inadequate milk yield</li><li>* Treatment and vaccination costs</li><li>* Cost of emergency e.g. fire brigade and police costs</li><li>* Losses resulting from nuclear or radioactive contamination, war, terrorism and political risks.</li><li>* Loss due to bird flu and swine fever.</li></ul>

# HORSE INSURANCE

