



SUPPLEMENTAL REPLANT COVERAGE (SRC) APPLICATION

Producers Ag Insurance Group®, 5601 Interstate 40 W, Suite 204, Amarillo, TX 79106

Date _____ Page ____ of ____

Disclaimer: The Supplemental Replant Coverage product is a product issued and underwritten by PAIC and is not reinsured by the Federal Crop Insurance Corporation.

APPLICANT'S NAME:			AGENCY:		AGENCY CODE/SUB CODE:	
STREET ADDRESS:			ADDRESS:			
CITY:	STATE:	ZIP:	CITY:	STATE:	ZIP:	
PHONE:	CELL:		PHONE:			
IDENTIFICATION NUMBER:	IDENTIFICATION NUMBER TYPE:		SRC POLICY NUMBER:			

Crop Year	State
Crop	Insurance Per Acre based on 100% share*

*The actual insurance per acre will be equal to the selected insurance per acre based on 100% share times the interest in the crop, rounded to the nearest \$0.01.

MPCI Policy Number(s) Plans(s) (Example: "26-987-123456 RP")

REQUIRED STATEMENTS FOR CROP HAIL POLICIES BY STATE:

ARKANSAS and LOUISIANA—WARNING: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

IDAHO—Any person who knowingly, and with intent to defraud or deceive any insurance company, files a statement of claim containing any false, incomplete, or misleading information is guilty of a felony.

INDIANA—Any person who knowingly and with intent to defraud an insurer files a statement of claim containing any false, incomplete, or misleading information commits a felony.

KANSAS - Any act committed by any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written, electronic, electronic impulse, facsimile, magnetic, oral, or telephonic communication or statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for the personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto is considered fraud.

KENTUCKY—Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime.

MINNESOTA—A person who files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime.

TENNESSEE and VIRGINIA—It is a crime to knowingly provide false, incomplete, or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, or a denial of insurance benefits.

For All Other States: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

Signed by applicant _____ o'clock __M. _____/_____/20____

I declare that facts stated herein to be true and agree to the terms and conditions stated in this endorsement.

Applicant's Printed Name _____ Applicant's Signature _____ Date _____

Licensed Agent's Printed Name _____ Licensed Agent's Signature _____ Date _____