



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

APPLICATION FOR LIVESTOCK MORTALITY INSURANCE

☐ COMMERCIAL COVER ☐ NON-COMMERCIAL COVER ☐ SPECIAL COVER

NAME OF PROPONENT/APPLICANT: _____

ADDRESS : _____

CONTACT NO. : _____

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. : _____

Date

Signature of Proponent