FARM SCHEDULE

Location of ***Insured Premises*** _____

_____

We cover only the following classes or items of property for which a specific amount~~limit~~ of insurance~~liability~~ is shown. ***Our*** liability shall not exceed such limit. This coverage is subject to the ***terms*** of the policy applying to Coverage E and Coverage F.

Item No	Fire or Lightning, Explosion Amount~~Limit~~ of Insurance	Extended Coverage Amount~~Limit~~ of Insurance~~Liability~~	EXTENDED COVERAGE APPLIES ONLY IF AN AMOUNT OF INSURANCE IS LISTED FOR EACH ITEM. THE PERILS ARE LISTED ON FORM FL-6(EC) ~~Liability~~ Coverage E- Scheduled Farm Personal Property
1.	$_____	$_____	On ***Farm Produce and Supplies*** _____
2.	$_____	$_____	On ***Mobile Machinery*** _____
3.	$_____	$_____	On ***Poultry*** _____
4.	$_____	$_____	On ***Livestock*** _____
5.	$_____	$_____	On _____
6.	$_____	$_____	On _____
7.	$_____	$_____	On _____
8.	$_____	$_____	On _____
9.	$_____	$_____	On _____
10.	$_____	$_____	On _____
11.	$_____	$_____	On _____
12.	$_____	$_____	On _____
13.	$_____	$_____	On _____
14.	$_____	$_____	On _____
15.	$_____	$_____	On _____
16.	$_____	$_____	On _____
17.	$_____	$_____	On _____
18.	$_____	$_____	On _____
19.	$_____	$_____	On _____
20.	$_____	$_____	On _____
	$_____	$_____	Total Amount of Insurance

Coverage F-Farm~~F- Barns, Buildings and Other~~ Structures and ***Additional Farm Dwellings***

21.	$_____	$_____	On _____
22.	$_____	$_____	On _____
23.	$_____	$_____	On _____
24.	$_____	$_____	On _____
25.	$_____	$_____	On _____
26.	$_____	$_____	On _____
27.	$_____	$_____	On _____
28.	$_____	$_____	On _____
29.	$_____	$_____	On _____
30.	$_____	$_____	On _____
31.	$_____	$_____	On _____
32.	$_____	$_____	On _____
33.	$_____	$_____	On _____
34.	$_____	$_____	On _____
35.	$_____	$_____	On _____
36.	$_____	$_____	On _____
37.	$_____	$_____	On _____

38.	$_____	$_____	On _____
39.	$_____	$_____	On _____
40.	$_____	$_____	On _____
	$_____	$_____	Total Amount of Insurance

Vandalism coverage applies: ☐ Yes ☐ No