



The Standard of Veterinary Excellence

AAHA Business Insurance Program Application

NEED A QUOTE?

- Return this completed application
- OR Call and apply with a sales executive
- OR Send us your current policy declaration pages and contact information
- OR Apply online at www.aahainsurance.org/quote

P: **866-380-AAHA** (2242)
 F: **866-381-AAHA** (2242)
aaha@hubinternational.com
www.aahainsurance.org

Priority Code: [website](#)



Broker and Consultant:
 HUB International Midwest Limited,
 HUB International Midwest Insurance Agency (CA)

General

Practice Name _____ Practice Contact Name: _____

Practice Address: _____ (city/state/zip) _____

Phone: _____ Fax: _____ Email: _____

Legal Structure: Sole Proprietor Partnership Corporation Limited Liability Company Other: _____

Practice Type: Small Animal Exclusive Mixed (mostly small animal) Mixed (mostly large animal)

Are you a mobile practitioner? Yes No • Do you have data breach or cyber liability coverage? Yes No

Employment Practices

Number of Employees: Full-time: _____ Part-time: _____ Estimated Total Assets: \$ _____

Have you completed any of the following in the past 18 months? Are you planning to complete any of the following during the next 12 months?

Our practice is not contemplating layoffs, staff reductions, or facility closings that will affect more than 25% of the workforce. True False

Our practice has written guidelines or procedures addressing discrimination, sexual harassment, and employee complaints that are available to our employees. True False

Our practice is not a subsidiary or U.S. division of a foreign parent company. True False

During the past three years, our practice has had fewer than three employment practices incidents, and the total amount paid or reserved on all litigation was less than \$50,000. True False

Flood

Current Expiration Date: _____ Insurer: _____ Premium: _____

Please describe all claims over the past three years and the approximate cost of each claim (attach an additional page if necessary):

Date: _____ Description: _____ Amount Paid: _____

Data

Yes, I am interested in coverage for protection against data breaches, cyber liability, and privacy exposures.
 A breach is defined as an event in which personally identifiable information is potentially put at risk – either in electronic or paper format.