

Thank you for trusting the AHLA with your vacant land coverage. If you have any questions while completing your application, please feel free to call us at 866-782-6330. We are open M-F 8:00 - 5:00 pm EST.

## Account Holder Information

First name:  Last name:  Email address:

## Property Owner/Insured Information

First name:  Last name:  Email address:

Mailing address:  City:  State:  Zip code:  Phone number with area code:

» If you need to add more landowners please add them on 'page 3.'

## Choose Your Policy

- \$1 Million Per Occurrence / \$2,000,000 Aggregate  
 \$2 Million Per Occurrence / \$2,000,000 Aggregate

Acres	Under 750	Over 750
<b>\$1 Million</b> (per occurrence)	<b>\$245</b>	<b>\$295</b>
<b>\$2 Million</b> (per occurrence)	<b>\$.33/Acre</b>	<b>\$.52/Acre</b>

## Choose Your Policy Term

Annual Master Policies start the 1st of every month, for next day coverage select current month. Please indicate which month you want coverage to begin.

Month\*

## Property Information

Property address:  State:  County:  Zip code:

Total acres:  Additional property addresses, identification, etc.

## Preliminary Questions

Liability coverage for the property owner does not provide protection for owned timber, physical damage to or liability in connection with buildings, structures, towers, housing accommodations, commercial or business operations of any kind.

Yes No

- Any of this property leased for hunting? (private or commercial)  
  Any of this property leased or rented? (i.e. farming)  
  Any of this property leased or rented for events such as weddings, reunions tournaments etc?  
  Any commercial or business operations of any kind conducted on premises?

Yes No

- Is there a swimming pool on the premises?
- Are there any lakes, ponds or bodies of water located on the property? (If yes, "No Swimming" signs are required to be posted)
- Any dams, spillways or bridges on this property?
- Any buildings, structures, towers or housing accommodations on this property?
- Have you ever had a covered loss on this property?

Sign full name in the box below, I affirm that the information given on this application is true and accurate as of this date (Month Day, Year) I also understand that premiums are 100% earned at time of purchase.

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Premiums are 100% earned and there is no prorated refund of premium if canceled midterm or after initial purchase.

## Payment information

Card number

Expiration date

Security code: (CVC)



## Billing information

First name:

Last name:

Billing address:

City:

State:

Zip code:

Paying by check? Please make check out to American Hunting Lease Association.

Please complete and return with payment to:

American Hunting Lease Association  
10412 Allisonville Rd. Ste 110 Fishers, IN 46038  
Email: [info@ahuntinglease.org](mailto:info@ahuntinglease.org)  
Phone: (866) 782-6330



# Additional Landowners If Needed

## Landowner / Property Owner

First name:  Last name:  Email address:

Mailing address:  City:  State:  Zip code:  Phone number *with area code*:

## Landowner / Property Owner

First name:  Last name:  Email address:

Mailing address:  City:  State:  Zip code:  Phone number *with area code*:

## Landowner / Property Owner

First name:  Last name:  Email address:

Mailing address:  City:  State:  Zip code:  Phone number *with area code*:

## Landowner / Property Owner

First name:  Last name:  Email address:

Mailing address:  City:  State:  Zip code:  Phone number *with area code*:

## Landowner / Property Owner

First name:  Last name:  Email address:

Mailing address:  City:  State:  Zip code:  Phone number *with area code*:

## Landowner / Property Owner

First name:  Last name:  Email address:

Mailing address:  City:  State:  Zip code:  Phone number *with area code*: