Ioka Farms, Inc.
13512 Doerfler Rd SE

## Seed Insurance Waiver Form

Date: $\qquad$ Crop Year: 2023 (July-June)*

Grower/Owner: $\qquad$
By signing this waiver, you are stating that you as the Grower or Owner of any seed at loka Farms, Inc. facilities will maintain your own insurance. I understand that loka Farms, Inc. will not be maintaining damage or loss insurance on my seed. By signing this waiver, I agree to hold loka Farms, Inc. harmless by way of subrogation for any loss or damage to property caused by fire, water, or other natural causes even if the loss is caused by fault or negligence of loka Farms, Inc. elected or appointed officials, employees, volunteers or others working on behalf of loka Farms, Inc.

Signed by: $\qquad$
On Behalf of: $\qquad$
Dated: $\qquad$
Please list your insurance company information below, and ask your insurance company to add loka Farms, Inc. onto the certificate of insurance and send us a copy.

| Physical address: | Mailing address: |
| :--- | :--- |
| $\frac{\text { loka Farms, Inc. }}{\text { loka Farms, Inc. }}$ |  |
| 14294 Riches Rd SE | 13512 Doerfler Rd SE |
| Silverton, OR 97381 | Silverton, OR 97381 |
| 503-873-6498 | $503-873-4464$ |

Insurance Co. $\qquad$ Agent Name: $\qquad$
Address: $\qquad$
$\qquad$ Agent Email: $\qquad$
*Please complete this form every year to remain in effect; or we will bill insurance charges at a daily rate of $\$ .0030 /$ pound $/$ month with your cleaning and/or storage invoice. If you have questions concerning this, please contact Jennifer Wall at 503-873-6498 or Jennifer@iokafarms.com.
Thank you!

