



Sulky Insurance Claim

Ohio Harness Horsemen's Association
2237 Sonora Drive • Grove City, OH 43123
614-221-3650 • 800-353-6442

**Report Must Be
Filed Within 30
Days of Accident**

(Please type or print all information except signature)

TO BE FILLED IN BY SULKY OWNER OR OHHA FIELD REPRESENTATIVE

Date of Accident _____ Track _____ Race Number _____

Name of Horse Involved _____

LIST ALL OWNER(S) OR LESSEE(S)

Current OHHA Member Circle Yes or No

| | | | |
|-----------------------|---------------|-----|----|
| _____ | Address _____ | Yes | No |
| _____ | Address _____ | Yes | No |
| _____ | Address _____ | Yes | No |
| Driver of Horse _____ | Address _____ | Yes | No |
| Sulky Owner _____ | Address _____ | Yes | No |

Sulky Owner's Signature **X** _____ Read insurance conditions on reverse side before signing

TO BE FILLED IN BY JUDGE OR OHHA FIELD REPRESENTATIVE

Parts of Sulky Damages (describe) _____
_____ Make _____ Color _____ Size _____

Description of Accident _____
_____ Signature **X** _____

Judge or OHHA Field Representative

TO BE FILLED IN BY REPAIR FIRM ONLY

Make _____ Color _____ Size _____ Serial Number (Must be included) _____

List Parts to Be Replaced:

| | |
|-------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |

Company Name _____
 Address _____
 City, State, Zip _____
 Company Phone Number _____

List Miscellaneous Materials:

| | |
|-------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |

Estimator's Signature **X** _____

List Labor Charge _____ \$ _____
 TOTAL ESTIMATE OF REPAIR \$ _____

PLEASE NOTE

This form must be completely filled out and names signed where X indicates signature before claim will be considered.

FOR OFFICE USE ONLY

Date Received _____
 () Allowed () Disallowed Estimate \$ _____
 Remarks _____

Authorized for payment by _____
 Date Check Mailed _____
 Make Check Payable to _____

OHIO HARNESS HORSEMEN'S ASSOCIATION

SULKY INSURANCE

Rules and Regulations Governing Claims:

1. Claims must be filed WITHIN 30 Days of the accident. Forms are available from the OHHA office, field representatives, presiding judges, and some starting judges. Form must be COMPLETELY FILLED OUT, including sulky serial number.
2. The OWNER of the sulky, the DRIVER, the TRAINER and ALL OWNERS or LESSEES of the horse involved must be current MEMBERS of the Ohio Harness Horsemen's Association. In the case of a borrowed sulky, the OWNER of the borrowed sulky must also be a member.
3. The insurance covers sulkies only, wheels and wheel disks are excluded.
4. Sulkies are insured ONLY when the accident occurs ON THE TRACK in a race or during warm up miles at pari-mutuel tracks and county or independent fair tracks. Coverage will apply for out-of-state accidents, provided (1) that the sulky owner, the driver, the trainer and all owners or lessees of the horse involved are RESIDENTS OF THE STATE OF OHIO and MEMBERS OF OHHA and (2) that the sulky claim is not payable under the rules of another horsemen's association representing the track where the accident occurred.
5. DAMAGE must be verified by the PRESIDING JUDGE or an OHHA FIELD REPRESENTATIVE and their signature must be on the claim form.

Ohio Harness Horsemen's Association

2237 Sonora Drive

Grove City, OH 43123

614-221-3650 • 800-353-6442



2018 OHHA Sulky Accident Reimbursement Policy:

1. At the time of purchase the **OWNER** of the sulky must register the sulky with the OHHA on the OHHA form. Registrations shall include all information in regards to the sulky, including make, model, year of manufacture, serial number (mandatory, 2017 forward), and bill of sale providing proof and date of purchase including whether purchased new or used, with or without wheels. Sulky coverage extends to party registering the sulky only.
2. The Sulky Insurance Claim must be reported to the OHHA within seven (7) days of the accident the claim arises from. The Sulky shall immediately be tagged as an accident sulky and removed from use until the Claim is closed. The Sulky Insurance Claim Form **must be filed WITHIN** 30 days of the accident. Sulky Insurance Claim Forms are available from the OHHA office, field representatives, presiding judges, and some starting judges. All Sections of the Form must be **COMPLETELY FILLED OUT**, by all Parties, including the serial number of the sulky. Pictures of all damage must be submitted to the OHHA in conjunction with the Sulky Insurance Claim Form. The OHHA will use their best efforts to validate serial numbers. The OHHA reserves the right **to completely deny a claim** when a serial number cannot be verified or confirmed adequate to substantiate the claim.
3. The OWNER of the sulky, the DRIVER, the TRAINER and ALL OWNERS or LESSEES of the horse involved must be current, paid, ACTIVE MEMBERS of the Ohio Harness Horsemen's Association before the time of the accident. If the Owner of the horse is a Stable, Corporation, or Business Entity, all individual members of the entity must be Active Members and the entity must be a paid OHHA Associate Entity Member. In the case of a borrowed sulky, the OWNER of the borrowed sulky must also be a paid OHHA Active Member.
4. The insurance covers USTA approved OHHA registered sulkies only, wheels and wheel disks are excluded.
5. Sulkies are insured **ONLY when the accident** occurs **ON THE TRACK** in a race or during warm up miles for a race, fair race, or qualifying race at Ohio Pari-mutuel Tracks or Ohio County or independent Fair Tracks. Matinee races or standalone Exhibition Races not held in conjunction with a Qualifying, Fair, or Pari-Mutuel race card are excluded from coverage. Manufacturer Defect is excluded from coverage.
6. Coverage extends to out-of-state accidents only if the following two criteria are both fully satisfied. **(1)** The sulky owner, the driver, the trainer and all owners or lessees of the horse involved are RESIDENTS OF THE STATE OF OHIO and ACTIVE MEMBERS OF OHHA **and (2)** that the sulky claim is not payable under the rules of another Horsemen's association when the accident occurred.
7. The accident and damage **must be** verified by the PRESIDING JUDGE or an OHHA FIELD REPRESENTATIVE (Pari-mutuel Track Representative or Regional Fair Coordinator), their signature must be on the claim form.
8. If the sulky damage is deemed repairable by the OHHA and the sulky is sent for repair by the OHHA, the owner of the sulky assumes the risk of loss on transport for the repair. If the sulky is lost, damaged, or destroyed during the repair or transport process, the OHHA reserves the right in it's exclusive discretion to refuse payment on the sulky dependent upon each individual case's facts and circumstances.
9. In the event of a "Total Loss Claim", the OHHA will only pay out as a total loss on a sulky if the sulky is destroyed ("cut-up") and proof of the destruction is provided to the OHHA by returning an identifying piece of the sulky, preferably that portion of the sulky that contains the serial number. The OHHA will only pay out on a Total Loss Claim once for any Sulky.
10. OHHA Sulky Insurance is a secondary policy and will cover claims when there is **no other** coverage **or** a primary policy limit has been reached. Other coverage may be found under a Member's private training center policy, training center general liability policy, homeowner's insurance policy, or general liability umbrella policy.

The OHHA in its complete discretion reserves the right to deny a claim when it isn't possible to substantiate the claim or otherwise.