

APPLICANT'S NAME	D	DBA (if applicable)			
Location Address for Event	City	State	Zip		
Name of Primary Contact	Email of Primary Contact	Email of Primary Contact Phone Number			
Mailing Address	City	State	Zip		
TYPE OF EVENT					
Estival/Fair	Individual Vendor Booth	Sporting Eve	nt/Tournament		
Concerts/Musical Event	Derade	Theater Perfe	ormance		
Convention/Trade Show	Wedding	Party/Picnic/	Social Event		
Competition/Show	☐ Motor Vehicle Race/Show	🗌 Beer Garden	, Beer Tent		
🗌 Rodeo					
🗌 Fundraiser (describe):					
Other (describe):					
Full description of event activities:					
\$300,000/\$600,000 \$1,	00,000/\$1,000,000	Liquor Liabilii 00/\$3,000,000 00/\$2,000,000 00/\$3,000,000	ty Only		
DATES OF EVENT Start date	/ / E	End date / /			
Is Set-up coverage required?			YES		
Is Takedown coverage required? If ves. list dates					
Is Rain Date coverage needed?	e(s) for event:				
Will event end after 2:00 am on any c					

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UNDERWRITING ELIGIBILITY

Any use of heavy machinery such as bulldozers, backhoes, cranes, excavators or similar equipment? Does event feature overnight camping, bonfires, swimming, boating, jet skis or on-water fishing?

ADDITIONAL INSUREDS

Name	Interest	Mailing Address	
		YES	NO
Is Primary and Non-contributory wording needed?			
If yes, list number of contracts r	needed:		
Is Waiver of Subrogation needed?			

Is Waiver of Subrogation needed?

If yes, list number of contracts needed: _____

LOSS HISTORY

Date of Loss	Description of Loss	Open/Closed?	Amount Paid	Reserve Amount

GENERAL LIABILITY UNDERWRITING INFORMATION

Estimated number of attendees per day_____

If applicant is operating an individual	vendor	^r booth	n, list estimated attendees expected at booth:		
Does the event feature any of the following:	YES	NO		YES	NO
Mechanical or carnival rides or devices?			Fireworks, firearms or pyrotechnics?		
Haunted houses or hayrides?			Hot air balloon, helicopter or airplane rides?		
Celebrities or high-profile attendees?					
If yes, please list				YES	NO
Is security provided?					
If yes, and security is provided by inde liability insurance?	≥pende	ent con	ntractors, are they required to carry their own		
Will the event feature any medical or health so	creenin	as/trea	atment?		

YES

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NO



LIQUOR LIABILITY UNDERWRITING INFORMATION

Estimated number of attendees per day	YES	NO
Is the applicant an individual or business that regularly sells, serves or furnishes alcohol?		
Will the alcohol be sold or served by a professional bartender with formal alcohol server training?		
Will the applicant be selling alcohol at the event?		
Is self-service or BYOB (bring-your-own-bottle) permitted?		

ELIGIBILITY BY EVENT TYPE – COMPLETE IF APPLICABLE: WEDDING

Is applicant (who is hosting the wedding), in the business of selling, serving or furnishing alcohol	YES	NO
Is a caterer or professional bartender serving the alcohol at the event?		
Does applicant require coverage for a rehearsal dinner?		

If yes, provide date: ____/___/____

Optional coverages (eligible wedding events only):

Type Of Coverage	Limit Needed	Maximum Limit Available
Cancellation or Postponement Coverage	\$	\$50,000
Photographs or Video Coverage	\$	\$10,000
Event Gift Coverage	\$	\$10,000
Damage to Wedding Attire (\$1,000 included automatically)	\$	\$10,000
Loss of Deposits (\$1,000 included automatically)	\$	\$10,000
Scheduled Jewelry Coverage Item Description Item Description Item Description Item Description	\$\$\$\$\$\$\$	\$10,000 total



CONCERT/MUSICAL EVENT

Check type of music featured:

🗌 Rock	Country	— Нір-Нор/Кар	Gospel		
🗌 Heavy Metal	Folk/Cultural	Jazz/Blues	Orchestral		
Other (describe):				YES	NO
Are performers known o	n national level?				
List name(s) of performe	r(s):			_	
SPORTING/ATHLETIC	EVENT				
Describe type of event:_				YES	NO
Does event involve profe	essional athletes?				
If yes, list the at	nletes' names:			-	
Does event include an o	bstacle course, mud run, trail	run or off-road course?			
MOTOR VEHICLE RAC	E, RODEO, TRACTOR PULL	OR TRUCK SHOW		YES	NO
Is the venue designed sp	pecifically for this type of even	it?			
Are permanent barriers	made from metal, concrete or	similar material in place to pro	otect spectators?		
List height of the barrier	s:feet				
Are spectators permittee	d in the infield or pit areas?				
Will the event allow aud	ience participation in the ring,	/infield?			
Does event include an o	bstacle course, mud run, trail	run or off-road course?			
Does event feature drag	racing, flame-throwing or bur	rnouts?			
CAR SHOW OR MOTO	R VEHICLE SHOW			YES	NO
Do vehicles remain in sta	ationary during the event?				
Does event feature drag	racing, flame-throwing or bur	rnouts			



FRAUD WARNING STATEMENTS

NOTICE TO ALABAMA APPLICANTS: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or who knowingly presents false information in an application for insurance is guilty of a crime and may be subject to restitution fines or confinement in prison, or any combination thereof.

NOTICE TO ARKANSAS, LOUISIANA, RHODE ISLAND AND WEST VIRGINIA APPLICANTS: Any person who knowingly presents a false or fraudulent statement for payment of a loss or benefit or knowingly presents false information in an application in insurance is guilty of a crime and may be subject to fines and confinement in prison.

NOTICE TO COLORADO APPLICANTS: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

NOTICE TO DISTRICT OF COLUMBIA APPLICANTS: WARNING: it is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, the insurer may deny insurance benefits, if false information materially related to the claim was provided by the applicant.

NOTICE TO FLORIDA APPLICANTS: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

NOTICE TO KANSAS APPLICANTS: Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of any insurance policy for commercial or personal insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto act.

NOTICE TO KENTUCKY APPLICANTS: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime.

NOTICE TO MAINE APPLICANTS: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or denial of insurance benefits.

NOTICE TO MARYLAND APPLICANTS: Any person who knowingly or willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly or willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

NOTICE TO MINNESOTA APPLICANTS: A person who submits an application or files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime.

NOTICE TO NEW JERSEY APPLICANTS: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal or civil penalties.



NOTICE TO NEW MEXICO APPLICANTS: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to civil fines and criminal penalties.

NOTICE TO NEW YORK APPLICANTS: Any person who knowingly and with intent to defraud any insurance company or other person files and application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each violation.

NOTICE TO OHIO APPLICANTS: Any person who, with intent to defraud or knowing that he/she is facilitating a fraud against any insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

NOTICE TO OKLAHOMA APPLICANTS: WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

NOTICE TO OREGON APPLICANTS: Any person who knowingly and with intent to defraud an insurance company or another person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading information concerning any fact material thereto, may be committing a fraudulent insurance act, which may be a crime and may subject the person to criminal and civil penalties.

NOTICE TO PENNSYLVANIA APPLICANTS: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

NOTICE TO VERMONT APPLICANTS: Any person who knowingly presents a false statement in an application for insurance may be guilty of a criminal offense and subject to penalties under state law.

NOTICE TO TENNESSEE, VIRGINA AND WASHINGTON APPLICANTS: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

NOTICE TO ALL OTHER APPLICANTS:

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON, FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS INFORMATION FOR THE PURPOSE OF MISLEADING, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND MAY SUBJECT SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

Name (Please Print)

Title

Applicant's Signature

Date