

ROCKWOOD CASUALTY SPECIAL EVENTS APPLICATION

Agents Code: _____ Agents Name: _____

Named Insured: _____

Mailing Address: _____

(Mailing Address)

Event Address _____

(City)

(State)

(Zip)

(Mailing Address)

Effective Date: _____ Expiration Date: _____

Type of Event: _____

Liability Limits: \$ _____ Occurrence \$ _____ Aggregate

Previous Carrier: _____

Any losses in the past 3 years? YES / NO If yes describe below

Any Additional Insured? YES / NO If yes explain the reason for the additional insured below

IF ATHLETIC EVENTS - COMPLETE THIS SECTION:

Number of Games: _____ Number of Participants: _____

Age of Players: _____

Are there any bleachers on the premises? YES / NO If so, # of sets of Bleachers: _____

Do they sell concessions? YES / NO If so, what are the receipts? _____

Any Special fundraisers? YES / NO If so, explain _____

Sports camps: Overnight or not Overnight Number of camps per week: _____

IF OTHER TYPE OF EVENTS - COMPLETE THIS SECTION:

Is there any alcohol served? YES / NO

Number of Vendors: _____ Do they provide their own liability coverage? YES / NO

Are they required to provide certificates of insurance? YES / NO Vendors Receipts \$ _____

Is there music provided? YES / NO If so, what type of music? _____

Are there any mechanical rides? YES / NO

Are there any fireworks? YES / NO If so, do they have their own liability coverage? YES / NO

Are they required to provide certificates of insurance? YES / NO

Are there any petting zoos or animal rides? YES / NO If so, describe below

APPLICANTS SIGNATURE: _____

AGENTS SIGNATURE: _____

IMPORTANT:

Special events cannot be quoted or bound without the knowledge & consent of a Rockwood Underwriter.