

Benchmark

MANAGEMENT GROUP, INC.

1730 Park Street, Suite 214 Naperville, IL 60563
Phone: (630) 778-7000 Fax: (630) 778-7007

Special Event Supplemental General Liability Application

(Complete in addition to ACORD General Liability Application)

Name of Applicant: _____

Web site Address: _____

1. **Description of event** (attach any flyers, brochures, etc.): _____

Maximum daily attendance: _____ Total attendance: _____ Sales: \$ _____

Length of event: _____ Estimated age group of audience: From _____ to _____

No. of Participants: _____ Do participants sign waiver of liability agreements?..... Yes No

2. **Applicant's experience** in conducting events of this or similar nature: _____

Is applicant an event coordinator?..... Yes No

3. Rides:

Will rides be provided? Yes No

If yes, type of rides: _____

Will ride operators hold applicant harmless?..... Yes No

Does applicant have certificates of insurance from the ride vendors? Yes No

Rides inspected? Yes No

Do rides have signs clearly marking age, height, and size limitations? Yes No

Will applicant be in compliance with state laws regulating amusement ride inspections?..... Yes No

4. Entertainment:

Will live entertainment be provided?..... Yes No

If yes, describe: _____

If a concert, type of music: classical jazz rap blue grass country/western
 gospel R&B alternative hard rock heavy metal
 hip-hop gothic other (describe): _____

Any special effects for the concert?..... Yes No

If yes, describe: _____

If fireworks are planned, is pyrotechnician licensed? Yes No

Distance between fireworks staging area and audience? _____

Spectators allowed in fireworks staging area? Yes No

Will firemen be present?..... Yes No

5. **Bicycle/Running Event:**

Is the route surface free of hazards and clearly marked? Yes No
Will all pedestrians and vehicular traffic be rerouted? Yes No

6. **Under 21 Dance, Grad Night or Prom:**

Are students allowed to leave and return? Yes No

7. **Haunted House:**

Describe building and construction: _____

Age: _____ Condition: _____

Are there separate entrances and exits? Yes No

Has the house been inspected by a Fire Marshall? Yes No

Does the house meet all local, city and state codes? Yes No

Describe any temporary structures: _____

Are the following present? Yes No

- Unlit stairs Moveable Floors Sinking Floors
- Slides Suspended Bridges Electric Shock Devices
- Fire or Flash Powders

Describe special effects: _____

Does applicant have lead and follow-up guides? Yes No

Ratio of attendants to the public: _____ Number of persons per group: _____

Age of clients: _____ Are children supervised? Yes No

Does applicant have a door monitor? Yes No

Does applicant have the public participate in stunts? Yes No

Does anyone touch the public? Yes No

If yes, explain: _____

Does applicant have a gift shop or concession stand? Yes No

If yes, receipts: _____

8. **Parade:**

Will souvenirs or other items be thrown into the crowd? Yes No

If yes, what is thrown: _____

Animals in the parade are: _____

Are all of the animals insured against third-party liability claims by the owner? Yes No

If yes, what are the minimum liability limits required of the owners: _____

Length of parade route: _____ Number of floats: _____ Number of Equestrians: _____

Number of bands: _____ Number of motorized vehicles and/or floats: _____

9. **Rodeo:**

Name(s) of rodeo promoter/company/stock contractor: _____

Does the rodeo board the stock in the applicant's facility overnight? Yes No

Does the rodeo company maintain responsibility for security of stalls/pens used to board the stock? Yes No

Are the transfer areas between the animal pens and the competition restricted from the general public? Yes No

Rodeo arena specifics: Indoors Outdoors Permanent Temporary

10. **Political Rally:**

Please describe: _____

11. **Security** (indicate type and number of each):

Independent security co.: _____ Off-duty police: _____

Employed security: _____ Chaperons: _____

Is there a written emergency plan in the event of an accident? Yes No

Does independent security company provide a certificate of insurance? Yes No

Do they hold the applicant harmless? Yes No

12. **Stadiums:**

Are bleachers or platforms to be used?..... Yes No

If yes, type: portable permanent

Back and side railings provided?..... Yes No

Construction: Wood Steel Concrete

Height in feet: _____ Age of bleachers or platform: _____

Are patrons protected from, and warned against, potential flying objects?..... Yes No

Are patrons allowed on the field, track or pit area? Yes No

Is public address system clearly audible in all parts of the facility? Yes No

Is there a backup electrical supply for lighting and the public address system?..... Yes No

Are premises entrances/exits well lit? Yes No

13. **Traffic Control:**

Who is responsible for crowd and traffic control? _____

Are parking areas smooth with clearly marked parking areas and exit roads?..... Yes No

Is parade route able to handle size and height of floats and are cross streets barricaded?..... Yes No

14. **Liquor:**

Is liquor to be served by applicant? Yes No

If yes, explain: _____

Does applicant want Host Liquor?..... Yes No

Is liquor to be served by others? Yes No

If yes, do they have Liquor Liability coverage? Yes No

15. **First Aid:**

Will first aid facilities be provided at the event?..... Yes No

If yes, describe: _____

If yes, who will be in charge of the facilities? Doctors Nurses Others: _____

16. If applicant is the sponsor, does the operator have liability insurance?..... Yes No

If yes, name of insurance carrier: _____ and policy limits of liability: \$ _____

17. Hold-harmless Agreements:

Is applicant held harmless by others? Yes No

Does applicant agree to hold any third party harmless? Yes No

If yes, who? _____

Is applicant naming anyone as additional insured?..... Yes No

If yes, who and why? _____

APPLICABLE IN THE STATE OF NEW YORK:

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 shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

FRAUD WARNING:

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.

PRODUCER'S SIGNATURE: _____ DATE: _____

APPLICANT'S SIGNATURE: _____ DATE: _____

AGENT NAME: _____ AGENT LICENSE NUMBER: _____

(Applicable to Florida Agents Only.)

IOWA LICENSED AGENT: _____