



McFall General Agency, Inc.

6443 S.W. Beaverton-Hillsdale Hwy., Suite 350, Portland, OR 97221-4210

SPECIAL EVENT APPLICATION

COMPLETE SECTION(S) ON PAGE TWO (2) APPLICABLE TO THE TYPE OF EVENT BEING HELD.

Applicant's Name: \_\_\_\_\_ Agent: \_\_\_\_\_

Applicant Mailing Address: \_\_\_\_\_ Inspection Contact: \_\_\_\_\_

Phone Number for Inspection contact: \_\_\_\_\_

Web Address \_\_\_\_\_

Proposed Policy Period: \_\_\_\_\_ to: \_\_\_\_\_

Insured is  Individual  Partnership  Corporation  Joint Venture  Other \_\_\_\_\_

Location of Event \_\_\_\_\_

Dates of Event \_\_\_\_\_

Description of Event (Attach copy of flyer or brochure) \_\_\_\_\_

UNDERWRITING INFORMATION

• Estimated attendance per day \_\_\_\_\_ Total for all days event is held \_\_\_\_\_
Gross Receipts \$ \_\_\_\_\_

• Food or beverages sold or served by applicant? .....  Yes  No
If yes, provide details. \_\_\_\_\_

Alcoholic beverages on premises? .....  Yes  No
If yes, are they served by  applicant or  other? Is liquor liability coverage in place? .....  Yes  No

• Seating arrangements - Describe (i.e., permanent, portable, bleachers, chairs, etc.) \_\_\_\_\_
If portable, who does the erection? \_\_\_\_\_

• Setup - Describe all exposures (i.e., booths, stages, electrical, special effects, etc.) \_\_\_\_\_
Who is responsible for the setup? \_\_\_\_\_

• Security - Describe (i.e., guards - unarmed vs. armed, dogs, off-duty police, etc.) \_\_\_\_\_
If guards are used, do they have their own insurance? .....  Yes  No

• Parking facilities .....  Yes  No
Operated by:  Applicant  Others If others, do they have their own insurance? .....  Yes  No
Is parking area  Paved  Dirt  Other (describe) \_\_\_\_\_

• Medical emergencies - How will an emergency be handled? (describe) \_\_\_\_\_

• Are certificates of insurance required from all subcontracted operations? .....  Yes  No

**ANIMAL EXPOSURE**

Are there animal rides?  Yes  No If yes, are animals hand lead?  Yes  No

Describe area where rides are given (arena, roped off area, etc.) \_\_\_\_\_

Is safety apparatus used?  Yes  No If yes, describe. \_\_\_\_\_

Is there a petting zoo?  Yes  No If yes, describe. \_\_\_\_\_

How is it set up (fenced area, etc.)? \_\_\_\_\_

Is the area supervised?  Yes  No

**AMUSEMENT DEVICES - Kiddie Type**

Provide a complete list of equipment. \_\_\_\_\_

Is applicant properly licensed to operate equipment?  Yes  No

Does applicant have a documented maintenance schedule?  Yes  No

Are the rides supervised at all times?  Yes  No

**AMUSEMENT DEVICES - Other than Kiddie Type**

Operator must have insurance and provide a certificate of insurance with limits and coverage at least equal to those requested on this application.

**DEMOLITION DERBY, MUD BOGS AND TRACTOR PULLS**

Provide description of facility (attach diagram on separate sheet) including type of protection used to protect the spectators from flying debris, placement of barriers to keep vehicles a safe distance from spectators, etc. \_\_\_\_\_

**DOG RACES, HORSE RACES, RODEOS AND HORSE SHOWS**

Provide description of facility (attach diagram on separate sheet) \_\_\_\_\_

Are spectators allowed in any area where animals are kept when not performing?  Yes  No

Do livestock contractors have their own insurance?  Yes  No

Is seating at least ten (10) feet from the arena?  Yes  No

**FAIRS AND CARNIVALS**

Provide complete description of event (attach diagram on separate sheet indicating location of each exhibit, booth, ride, event, etc.) \_\_\_\_\_

**FIREWORKS EXHIBITION - SPONSOR'S RISK ONLY**

Pyrotechnicians must be licensed, have insurance and provide certificates of insurance with limits and coverage at least equal to those requested on this application.

Are volunteers used to perform any duties at the exhibition?  Yes  No

Spectators must be at least one hundred fifty (150) feet from where fireworks are being set off. Describe crowd controls used to maintain this distance. \_\_\_\_\_

**MUSICAL CONCERTS**

Name of performer(s) and type of music \_\_\_\_\_

Do they have their own insurance?  Yes  No

Describe seating, i.e., bleachers, grass, folding chairs, etc. \_\_\_\_\_

Is seating assigned?  Yes  No

Type of venue.  indoor  outdoor If outdoors, if facility designed to accommodate this type of event?  Yes  No

**PARADES - SPECTATOR LIABILITY ONLY**

Provide complete description of parade including crowd control (attach diagram of route and spectator areas on separate sheet.) \_\_\_\_\_

Provide number and type of floats. \_\_\_\_\_

Are there any animals in the parade?  Yes  No If yes, describe. \_\_\_\_\_

Are participants required to have their own insurance?  Yes  No

**LIMITS – GENERAL LIABILITY:**

LIMITS OF LIABILITY REQUESTED –

GENERAL AGGREGATE: \_\_\_\_\_

PRODUCTS & COMPLETED OPERATIONS AGGREGATE: \_\_\_\_\_ INCLUDED \_\_\_\_\_

PERSONAL & ADVERTISING INJURY: \_\_\_\_\_

EACH OCCURRENCE: \_\_\_\_\_

FIRE DAMAGE: \_\_\_\_\_

MEDICAL PAYMENTS: \_\_\_\_\_

**CERTIFICATE RECIPIENTS / ADDITIONAL INTERESTS:**

NAME AND ADDRESS:	INTEREST	ADD'L INS'D.
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

**PRIOR EXPERIENCE AND LOSSES**

PRIOR CARRIER	LIMITS	POLICY TERM	LOSS INFORMATION

Has the applicant been cancelled or non-renewed in the last three years? If yes, Explain.

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This application shall not be binding unless and until confirmation by the Company or its duly appointed representatives has been given, and that a policy shall be issued and a payment shall be made, and then only as of the commencement date of said policy and in accordance with all terms thereof. The said applicant hereby covenants and agrees that the foregoing statements and answers are a full and true statement of all the facts and circumstances with regard to the risk to be insured, and the same are hereby made the basis and conditions of the insurance and a warranty on the part of the Insured.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

**IMPORTANT NOTICE**

As part of our underwriting procedure, a routine inquiry may be made to obtain applicable information concerning character, general reputation, personal characteristics, and mode of living. Upon written request, additional information as to the nature and scope of the report, if one is made, will be provided.