



TENANT USER APPLICATION

If event requires underwriter approval please allow 10 days (if possible) prior to event date. If insufficient time is not allowed possible decline on coverage could occur.

EVENT HOLDER INFORMATION

Name:

Address:

Phone Number:

Fax Number:

Email Address:

EVENT INFORMATION

Type of Event (15th Birthday Party, Anniversary Party, Meeting, Dance, Job Fair)

Description of Event:

Are Fireworks Included?:

Carnival Rides?:

Date(s):

Hour(s):

Location:

Attendance (Per day):

ADDITIONAL INFORMATION

Additional Insureds:

Number of Concessionaires Requiring Coverage (Food Sales):

Number of Concessionaires Requiring Coverage (Non-Food Sales):

Number of Exhibitors Requiring Coverage (No Sales):

(Please provide separate list of concessionaires and exhibitors to be covered.)

Liquor Liability Needed?:

ENTITY USE ONLY:

Hazard Group		Liquor Premium:	\$
Attendance Premium	\$	Exhibitors Premium	\$
Concessionaire Premium	\$	TOTAL PREMIUM	\$