



# MARKEL SOUTHWEST UNDERWRITERS, INC.

## SPECIAL EVENT SUPPLEMENT

(Include Acord application)

Applicant's Name: \_\_\_\_\_ Location Address: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 \_\_\_\_\_

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

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

Length of event: \_\_\_\_\_ Estimated age group of audience: From \_\_\_\_\_ to \_\_\_\_\_

Number of Participants: \_\_\_\_\_

Do participants sign waiver of liability agreements? Yes No

**Applicants experience** in conducting events of this similar nature:

Has this event been held before? Yes No If yes, how many years? \_\_\_\_\_

**Rides:** Will rides be provided? Yes No

If yes, type of rides: \_\_\_\_\_

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

**Entertainment:** Will live entertainment be provided? Yes No

If yes, please describe: \_\_\_\_\_

If a concert, type of music:	Classical	Jazz	Rap	Blue Grass	Gospel
	Country/Western	R & B	Alternative	Hard Rock	Gothic
	Heavy Metal	Hip hop	Other: _____		

If fireworks are planned, is pyrotechnician licensed and insured? Yes No

Does applicant obtain a certificate naming him as an additional insured? Yes No

Distance between fireworks staging area and audience? \_\_\_\_\_

Spectators allowed in fireworks staging area? Yes No

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

Independent security company \_\_\_\_\_ 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

**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

**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 a re cross streets barricaded? Yes No

Liquor: Is liquor to be served by applicant? Yes No

If yes, please explain: \_\_\_\_\_

Does applicant want: Host liquor Liquor Liability (available in selected states only)

Is liquor to be served by others? Yes No

If yes, please explain: \_\_\_\_\_

**First Aid:** Will first aid facilities be provided at the event? Yes No

If yes, please describe: \_\_\_\_\_

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

Others: \_\_\_\_\_

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

If yes, name of insurance carrier: \_\_\_\_\_

Policy limits of liability: \$ \_\_\_\_\_

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? \_\_\_\_\_

Do independent contractors and vendors provide proof of General Liability coverage, including products? Yes No

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. This application does not bind any of the parties to complete the insurance transaction.

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

\_\_\_\_\_  
Producer's Signature

\_\_\_\_\_  
Date