



AMUSEMENT SUPPLEMENT APPLICATION

(Include Acord Application)

Applicant's Name: _____ Location Address: _____
 Mailing Address: _____

Is applicant properly licensed where required by law? Yes No License Number _____
 Number of active owners/officers/partners: _____ Number of Employees _____
 Estimated annual: Payroll (excl. owner) _____ Receipts _____ Subs Costs _____
 Does applicant subcontract work to others? Yes No
 If yes, are certificates of insurance required? Yes No
 Do subcontractors name the applicant as additional insured? Yes No
 Does applicant operate on a seasonal basis? Yes No
 Are signs clearly posted with rules of conduct, height requirements, and size limitations? Yes No
 Is there a refreshment stand? If yes, receipts: \$ _____ Yes No

Schedule of amusement devices or rides					
Name & Type	Age	Manufacturer	Description	Maximum Operating Speed	Attendant/Employee Present
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No

Please detail any "yes" answers to the following questions below.

Are attendants on duty during all operating times? Yes No
 Are maintenance logs kept on each device or ride? Yes No
 Are any devices or rides mounted on trailers? Yes No
 If yes, list radius of operations/type of device.
 Are devices and rides regularly inspected? Yes No
 If yes, are these inspections performed by properly licensed entities where required? Yes No
 Does applicant have a training program for its employees? Yes No
 Any multi-level driving ranges? Yes No
 Any firework or pyrotechnic exposure? Yes No
 Any animal rides or animal exposure? Yes No
 Are any devices available for rent? Yes No



Please list and explain devices: _____

Does lease agreement contain hold harmless in applicant's favor? Yes No

Details:

Attach a copy of the lease agreement.

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