STRICKLAND INSURANCE GROUP SPECIAL EVENTS APPLICATION

INCEPTION EXPIRATION	AGENT NUMBER, NAME AND AD	DRESS			
APPLICANT NAME / MAILING ADDRESS	LEGAL STATUS:				
	PARTNERSHIP				
ADDRESS OF EVENT/DESCRIBE LOCATION					
UNDERWRITING INFORMATION					
1. ESTIMATED ATTENDANCE PEI	R DAY				
	OVERTISING, BROCHURE, ETC., IF A				
	VERTISING, BROCHURE, ETC., IF A	AN T			
3 EVENT WILL BE HELD		2S 🗆			
		_			
4. CROWD CONTROL TYPE:	NUMBER: USHERS	POLICE GUARD DOGS			
	PRIVATE SECURITY	OTHER (DESCRIBE)			
	OFF-DUTY POLICE				
5. APPLICANT'S EXPERIENCE IN ETC.)		SIMILAR NATURE (NUMBER, DATES,			
6. 6.WILL BLEACHERS OR PLATFORMS BE USED? YES NO	A. D PERMANENT	B. CONSTRUCTION WOOD STEEL CONCRETE			
C.HEIGHT FEET	D. AGE YEARS	E. BACK AND SIDE RAILINGS PROVIDED 🔲 YES 🔲 NO			
F. CONDITION (DESCRIBE					
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7.		ZARD	INTEREST OF			
	INVOLVE:		SPONSOR	OPERATOR		
		FIREWORKS				
		AMUSEMENT S OR DEVICES				
		FOOD SALES				
	H	ALCOHOLIC				
		BEVERAGE SALES				
		PONSOR DOES OPER NAME O		BILITY INSURANCE? YES NO		
	B. HAVE CERTIFICAT NO	ES OF INSURANCE BI	EEN OBTAINED FI	ROM OPERATOR? 🔲 YES 🗌		
8.	HOLD HARMLESS AGREEMENTS:	A. DOES APPL	ICANT AGREE E ARMLESS ANY	3. IS APPLICANT HELD HARMLESS BY OTHERS?		
	AGREEMENTS.	THIRD PART	Y?			
		YES 🗌				
		A OR B IS YES, ATTA				
9.	 LOSS EXPERIENCE FROM PRIOR EVENTS OF SAME OR SIMILAR NATURE: (ATTACH ADDITIONAL SHEETS IF NECESSARY TO EXPLAIN) 					
DA	TE		SS 4	AMOUNT PAID OR OUTSTANDING		
		NATURE OF LOS	50 F			
CO						
_	VERAGE INFORMATION					
	VERAGE INFORMATION					
	VERAGE INFORMATION		/ERAGE	HOST LIQUOR LIABILITY		
LIN \$		DESIRED	/ERAGE	DESIRED		
				DESIRED		
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