



PARADES

To be used with ACORD or Special Event Supplemental Application or its equivalent

All questions must be answered - Application must be signed and dated by the applicant.

| | |
|---------------------------------|--------------------------------|
| Applicant's Name _____ | Agent _____ |
| Applicant Mailing Address _____ | Applicant's Phone Number _____ |
| _____ | Web Address _____ |
| _____ | Inspection Contact _____ |
| Policy Period _____ to _____ | Contact Phone Number _____ |

EXPOSURE:

Type of Event: Parade with Sponsored Special Event following Parade only (Recognition/Celebration)

DURATION:

Parade Date(s): _____

Operating Event Hours: Beginning: _____ AM PM Ending: _____ AM PM

Do you require Pre or Post Event Coverage for Set-Up or Tear Down?: Yes No

Set-Up Beginning: _____ Take Down Ending: _____

| | ESTIMATED GROSS SALES | | ESTIMATED |
|--|-----------------------|--|---------------------------|
| General Admission | \$ | | ATTENDANCE PER DAY |
| Parking Area: | \$ | | SQUARE FOOT AREA |
| Concession (incl. food and beverage – excl. alcohol) | \$ | | |
| Alcoholic beverages (if any or N/A) | \$ | | |
| Other (describe below) | \$ | | |

GENERAL INFORMATION:

EMPLOYEE/VOLUNTEER SPECIFICATION - PROVIDE DETAILED INFORMATION FOR ALL "NO" RESPONSES

1. Do you carry Workers Compensation or Volunteer Worker Liability insurance for workers? Yes No
2. Are Employees or Volunteers permitted to physically touch the spectators during the event? Yes No
3. Do Employees or Volunteers receive training to deal with the public in a crowded environment? Yes No
4. Are all Employees or Volunteers over the age of 18 years? Yes No
5. Do you provide adequate on-site medical or first aid services during event hours? Yes No
6. Do you monitor walking surfaces during the event to keep them clear of debris or obstacles? Yes No
7. Do you enforce and maintain adequate distance between the parade participants and..... Yes No
the general public by using barriers or barricades?
8. Do you prohibit the public from interacting with parade participants or floats? Yes No
9. Do your promotional advertisements or printed material encouraged spectators..... Yes No
not to bring pets (dogs or other animals) to the event?
10. Are public parking areas well lit and supervised? Yes No N/A

PARTICIPANT QUALIFICATIONS:

PROVIDE DETAILED INFORMATION FOR ALL "NO" RESPONSES

- 11. Are all participants/groups required to complete and sign a registration form? Yes No
- 12. Does the registration form clearly state participant rules, restrictions and regulations? Yes No
- 13. Are Registrants required to submit a detailed description of their act, group, display, or activity Yes No prior to participation in the parade?
- 14. Do you restrict participation to only those acts, displays or activities that meet registration rules? Yes No
- 15. Does the registration form contain a waiver of liability? Yes No
- 16. Are all participants required to provide proof of insurance? (General Liability, Automobile Liability) Yes No
- 17. Do you prohibit or restrict noise levels using air horns, horn blowing, fireworks or similar devices? Yes No
- 18. Do you prohibit parade participants from throwing objects into the crowd? Yes No
- 19. Do you prohibit parade participants from spraying any substance (including water) into the crowd? Yes No
- 20. Do you use or permit any participant to use flammables, pyrotechnics, fireworks, Yes No firecrackers, flash grenade, or any other type of explosive materials?
- 21. Do you enforce a minimum distance requirement between groups? Yes No
- 22. Do you enforce a maximum speed limit for all motorized vehicles, carriages, or wagons? Yes No
- 23. Do Employees or Volunteers monitor participants entering the parade route from the Yes No staging area to ensure they are authorized to participate in the event?
- 24. Are the staging/finishing areas large enough to allow separation between groups by type Yes No for safety purposes? (e.g. Bands, mounted riders, carriages, motorized vehicles, motorized floats etc..)
- 25. Do you restrict access to the staging/finishing area to authorized personnel and participants only? Yes No

SPECIALTY GROUPS – ADDITIONAL UNDERWRITING INFORMATION

Mounted Riders

- What is the minimum age requirement for any mounted participant? _____
- Are all riders under the age of 10 required to wear protective headgear? Yes No
- Do mounted groups or brigades stage and finish in a designated area away from other participants? Yes No
- Are riders required to remove their animal immediately if it experiences distress or control issues? ... Yes No

Floats – Self-propelled or Trailer Driven

- Are all units carrying passengers required to have safety rails? Yes No
- Do you require adult supervision be provided for passengers under a certain age? Yes No
- Do you set maximum length restrictions to ensure safe turning radius throughout the parade route? Yes No
- Are all floats escorted by walking members of the brigade to monitor distance, Yes No speed, and clearance around signs, barricades, street corners or spectators?

Motorized Vehicles - Including but not limited to Autos, Mobile Equipment, Farm Equipment, Race Cars, Shriner Cars, Go Karts, Golf Carts, Motorcycles, tractors etc.

- What is the minimum age requirement for any participant driver? _____
- Are all riders/drivers required to wear appropriate safety equipment (helmets etc)? Yes No
- Do you allow the units to perform stunting or racing maneuvers? Yes No
- Do motorized groups or brigades stage and finish in a designated area Yes No away from other participants?

Carriage/Wagon

- Are all units carrying passengers required to have safety rails? Yes No
- Do you require adult supervision be provided for passengers under a certain age? Yes No
- Are carriages staged and finish in a designated area away from other participants? Yes No
- Do you enforce a minimum age requirement for carriage drivers? Yes No

Balloons or Inflatable Characters

- Do you restrict the size of the units? Yes No
- Do you require all units to be handled by qualified personnel? Yes No
- Are high wind guidelines in place and restrictions fully enforced? Yes No
- Are balloons staged and finish in a designated area away from other participants? Yes No
- Are all flammable tanks or service vehicles kept in a designated area to prevent Yes No
from external ignition sources?

PRODUCTS/COMPLETED OPERATIONS (PRODUCTS OTHER THAN FOOD)

| PRODUCTS | ANTICIPATED GROSS SALES |
|----------|-------------------------|
| | |
| | |

Attach literature, brochures, advertisements if available

Remarks: _____

PLEASE READ BELOW AND COMPLETE SIGNATURE BLOCK ON LAST PAGE

I have reviewed this application for accuracy before signing it. As a condition precedent to coverage, I hereby state that the information contained herein is true, accurate and complete and that no material facts have been omitted, misrepresented or misstated. I know of no other claims or lawsuits against the applicant and I know of no other events, incidents or occurrences which might reasonably lead to a claim or lawsuit against the applicant. I understand that this is an application for insurance only and that completion and submission of this application does not bind coverage with any insurer.

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.

FRAUD STATEMENT FOR THE STATE(S) OF:

Alabama, Alaska, Arizona, Arkansas, California, Connecticut, Delaware, District of Columbia, Georgia, Idaho, Illinois, Indiana, Iowa, Louisiana, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, North Carolina, North Dakota, Rhode Island, South Carolina, South Dakota, Texas, Utah, Vermont, West Virginia, Wisconsin, Wyoming: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

Colorado: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include

imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

Florida: Any person who knowingly and with intent to injure, defraud or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Hawaii: Intentionally or knowingly misrepresenting or concealing a material fact, opinion or intention to obtain coverage, benefits, recovery or compensation when presenting an application for the issuance or renewal of an insurance policy or when presenting a claim for the payment of a loss is a criminal offense punishable by fines or imprisonment, or both.

Kansas: Any person who commits a fraudulent insurance act is guilty of a crime and may be subject to restitution, fines and confinement in prison. A fraudulent insurance act means an act committed by any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer or insurance agent or broker, any written, electronic, electronic impulse, facsimile, magnetic, oral or telephonic communication or statement as part of, or in support of, an application for insurance, or the rating of an insurance policy, or a claim for payment or other benefit under an insurance policy, which such person knows to contain materially false information concerning any material fact thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto.

Kentucky, Ohio, Pennsylvania: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime.

Maine, Tennessee, Virginia, Washington: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines, or a denial of insurance benefits.

Maryland: Any person who knowingly or willfully presents a false or fraudulent claim for payment of a loss or benefit or knowingly or willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

New Jersey: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

New Mexico: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to civil fines and criminal penalties.

New York: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

Oklahoma WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

Oregon: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents materially false information in an application for insurance may be guilty of a crime and may be subject to fines and confinement in prison.

Producer's Signature

Date

Applicant's Signature

Date