



Allen Financial Insurance Group

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SPECIAL EVENT APPLICATION

Please complete application and send all attachments:

Agent/Broker: _____ Date of Application _____

Address: _____

Contact: _____ Telephone Number: _____

E-Mail _____ Fax Number: _____

APPLICANT INFORMATION

1. Name of Applicant: _____

2. Address: _____

3. In business under present management since: _____

4. The Applicant is: An Individual A Partnership A Corporation Other:

5. Website Address: _____

THE EVENT

6. Event Name: _____

7. Event Location: _____

8. Event Description: _____

9. Event Dates From: _____ To: _____ Number of Days: _____

10. Event Times From: _____ To: _____ Number of Hours: _____

11. Coverage Term From: _____ To: _____

12. Limits of Liability Requested: \$ _____

13. Venue/Facility Name: _____

14. Venue/Facility Address: _____

15. Does the Venue/Facility carry Liability Insurance? Yes No Limit \$ _____

16. Capacity: _____ Indoors Outdoors

17. Admissions/Attendance Admissions Per Day _____ Total all days _____

Tickets Printed _____ # Tickets sold to date _____

18. Type of Seating

Seat Construction: Permanent Temporary

Seating is: General Admission Reserved

Seating Provided: Bleachers Stadium Folding Chairs

Other: _____

19. Is Liquor Liability Insurance coverage is needed? Yes No
- a) What are the anticipated Liquor receipts? \$ _____
- b) What kind of liquor is served? _____ % Beer _____ % Wine _____ % Full Bar
- c) If Subcontracted out, do you receive a commission on the liquor sales? Yes No
- d) Are Local liquor laws governing sales to minors/intoxicated followed Yes No
- e) What controls are used? Wristbands Used Other (Describe below)

20. Will there be any exhibitions, parades, pageants or demonstrations? Yes No
- If yes, please describe: _____

SECURITY & PROTECTION

21. Name of Outside Security Firm: _____
- Number of Guards _____ Outside Firm _____ City Police _____ Venue Employees _____
22. First Aid: City Paramedics Venue Staff None
23. Fire Protection: Extinguishers Municipal Volunteer
24. Are you responsible for Parking? Yes No
- a) If yes, is there Valet Parking? Yes No
- b) Patrolled by Security? Yes No
- c) What is the square footage of parking area? _____

Vendors/Concessionaires

25. Attach a list of vendors and or concessionaire booths along with a sample copy of the contract required by the applicant.
26. Will the Event be held Outdoors Yes No
- a) Is the facility fenced? Yes No
- b) What is the type of Fence? _____
- c) Does the event end prior to sundown? Yes No
- d) Is there adequate lighting for a night time Event? Yes No
27. Are there any swimming pools, lakes or bodies of water? Yes No
- a) Is swimming allowed? Yes No
- b) Life guard on duty? Yes No
- c) Is water hazard fenced? Yes No
- If No, give Details _____
28. Evacuation/Egress plan arranged with civil authorities? Yes No
29. Overnight Camping? Yes No
- If yes provide details, layout, security, etc. _____
30. Will there be adequate drinking water and portable toilets? Yes No

31. Responsibility Chart

	N/A	Venue	Applicant	Promoter	Certs. Provided
Security					
Liquor					
First Aid					
Vendors					
Concessions					
Pyrotechnics					
Rides					
Live Animals					
Tents					
Bleachers					
Temporary Stage					
Temporary Lighting					
Stunts					

32. Has same event been held before? Yes No

a) Name of previous carrier: _____

b) If yes, have there been any losses? Yes No

c) Attach Hard Copy Loss Runs.

33. Required attachments:

Copy of "rental agreement or venue contract"

Copy of flyer, press release, advertising

Facility diagram (outdoor events)

Copies of certificates if applicant is responsible for security, rides, animals or pyrotechnics

List of required additional insured(s)