



THE ASI CLASSIC SUPPLEMENT

Include the following supplement with the ACORD application(s) appropriate to coverages selected.

Applicant: _____

General Liability — Completion of this section is required for all *ASI Classic* policies.

1. Private course? _____ Public course? _____
2. Annual number of rounds played: 9 holes _____ 18 holes _____
3. ISO General Liability Territory code: _____
4. Lodging or convention facilities? _____
5. Amusement devices such as watercraft, go-carts, skeet shooting or batting cages? _____
6. Total receipts from all Named Insured operations: _____ Receipts from all golfing operations: _____
Receipts from Driving Range, if any: _____
7. Does the Insured sponsor Special Events? _____ If yes, please provide detail: _____

Property — Required when property coverage is written.

- * 8. Is there an established Hole-In-One policy? _____ If yes, please attach copy of written policy (should include prize value).
9. Is the course enclosed by any type of fencing or natural barrier such as woods or a lake? _____
If yes, please provide detail: _____
10. Where are the golf carts stored? _____ Recharged? _____
11. Is the golf cart storage building locked at night? _____
12. Is the golf cart storage building designed to handle the electrical load from recharging golf cart batteries? _____
13. Are there any banquet facilities? _____ If yes, what type of kitchen protection devices (i.e., ansul system, sprinkler systems) and cleaning/maintenance policies are in place? _____
14. Is there a restaurant exposure? _____ If yes, please complete and submit the Restaurant Supplement, AP 75 59.
* This coverage not available in New York.

Swimming Pool — Completion required if a swimming pool is on premises, regardless of coverages requested.

1. Do all surfaces in and around the pool feature nonslip characteristics? _____
2. If outdoors, is the pool enclosed by a fence at least 5 feet high with no openings greater than 4 inches in any dimension? _____
Are gates self-closing and self-latching? _____
3. What are the hours of operation? _____ Are gates locked and pool areas inaccessible after hours? _____
4. Are rules posted and enforced? _____
5. Are depth markers at least 4" high on top and vertical walls, and are they visible when in the pool? _____
6. Is the perimeter posted "NO DIVING" in areas less than 8 ft. deep? _____
7. Are premises lighted in and around pool area from dusk to close? _____
8. Is chlorine gas used for water purification? _____ If so, describe handling procedures: _____

9. Is pool water tested at least weekly for sanitary requirements? _____

10. Life rings/shepherds hook provided? _____

11. List all recreation equipment in or around the pool and indicate height of each (including diving boards, slides, etc.):

12. Are beverages in glass containers or any alcoholic beverages permitted at pool side? _____

13. Are certified lifeguards on duty? _____

14. May private parties reserve the pool area? _____ If so, comment on hours permitted for parties, and whether a lifeguard is on duty for duration of event: _____

Date: _____ Agent: _____ Agency Number: _____