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a division of JD Fulwiler & Co. Insurance   
5727 SW Macadam Avenue Portland, OR 97239  
877.305.5040 | www.eventinsurancenow.com

**Application for Public Liability**

**Including Festival, Parades, Alcohol**

**Applicant Information**   
Applicant Name:

Street Address:

City, State, Zip:      ,      ,

Phone Number:       Email Address:      

**Event Information**

Name of Event:

Date of Event:

Time(s) of Event:

Location of Event:

Facility Name:

Facility Street Address:

City, State, Zip:      ,      ,

Description of the Event:

Is this event indoors or outdoors? Indoors Outdoors

If outdoors, is the area fenced or enclosed? Yes No

Are you responsible for parking? Yes No

What is the estimated attendance per day?

What is the price of admission?

Are vendors or trade booths required to have/maintain their own insurance? Yes No

Are vendors or trade booths required to provide a certificate of insurance? Yes No

What is the number of vendors or trade booths?

What goods are to be displayed?

Are all goods finished products or demonstrations? Yes No

Will there be any Exhibitions, Demonstrations, Parades or Pageants? Yes No

If yes, please describe:

If the event is outdoors, does the event end ninety minutes prior to sundown? Yes No

If no, is there permanent lighting over all spectator’s areas and parking lots? Yes No

If a stage is involved, is the stage of temporary or permanent construction?

Temporary Construction Permanent Construction  
If temporary, who is responsible for set up of stage?

If other than the applicant, is a certificate of insurance provided? Yes No

If other than the applicant, is applicant named as an additional insured? Yes No

Is temporary lighting involved? Yes No

If yes, who is responsible for hook up of lighting?

If other than the applicant, is a certificate of insurance provided? Yes No

If other than the applicant, is applicant named as additional insured? Yes No

Is a tent involved? Yes No

If yes, who is responsible for the set up of tents?

If other than the applicant, is a certificate of insurance provided? Yes No

If other than the applicant, is applicant named as additional insured? Yes No

Who is providing food and/or drink?

If other than the applicant, is a certificate of insurance provided? Yes No

If other than the applicant, is applicant named as additional insured? Yes No

Has this event been held in the past by this applicant? Yes No

If yes, were there any losses or claims? Yes No

If yes, please describe:

Is liquor being served (given away) at this event, not SOLD in anyway? Yes No

Is liquor to be sold at this event? Yes No

If yes, does the entity selling the alcohol have a state issued permit/license? Yes No

If yes, is there a liquor liability policy in-force? Yes No

If yes, is the applicant named as an additional insured? Yes No

Is the applicant providing any overnight accommodations such as camping? Yes No

If yes, please describe:

Who is responsible for providing security:

If other than the applicant, is a certificate of insurance provided? Yes No

IF other than the applicant, is applicant named as additional insured? Yes No

Is the security provided armed or unarmed?

Does the event involve a parade? Yes No

If yes, how many units will there be (each float, band, or car is a unit)?:

Will anything be thrown from the units? Yes No

If yes, what will be thrown from the units?

What is the length of the parade in blocks?

Length of time?

What is the estimated number of spectators?

Are fireworks or pyrotechnics to be used? Yes No

If yes, please describe:

Will ANY live musical performance have rap, hip hop, punk or heavy metal music?

Yes No *(You can verify a band genre by entering their name on* [*www.allmusic.com)*](http://www.allmusic.com))

Has this event been held in the past by the applicant? Yes No

If yes, for how many years?

Please describe losses over $5,000:

Has your prior insurance ever been cancelled? Yes No

Has your prior insurance ever refused to renew? Yes No

**Standard Limits of Liability will be offered.**

$3,000,000 General Aggregate

$1,000,000 Products Aggregate

$1,000,000 Each Occurrence

$1,000,000 Personal/Adv Injury

$100,000 Fire Damage

$ usually excluded Medical Payments

If higher limits of liability or additional coverages are required, please indicate:

**Additional Insured Information (usually the facility hosting the event)**

Name:

Street Address:

City, State, Zip:      ,      ,

Relationship:

Will you require more than one Additional Insured? Yes No

If yes, please list name, full street address, and relationship:

**Applicant Signature:**

**Printed Applicant Name:** **Date:**

**Broker Information *(if applicable)***

Agency Name:

Representative:        
Email:

Phone Number:

**PLEASE FAX OR EMAIL THE COMPLETED FORM WITH A COPY OF YOUR POLICY TO:**

**email: events@eventinsurancenow.com | fax: 503.977.5848**