



APPLICATION FOR EVENT INSURANCE

Name of Applicant _____

Address of Applicant _____

Applicant Phone # _____ Email _____

Dates of Event _____ Time(s) _____

Name of Event _____

Location of Event _____

Name of Facility _____

Address of facility _____

Description of Event _____

Is this Event Located Indoors or Outdoors? _____

If Outdoors, Is the Area Fenced or Enclosed? Yes No

Are you Responsible for Parking? Yes No

What is the Estimated Attendance of the Event? _____

What is the Price of Admission (if applicable)? _____

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 Areas and Parking Lots? Yes No

Who is Providing the Food and/or Drink? _____

Is Liquor being served at this event? Yes No
Is Liquor to be Sold at this Event? Yes No

Are there Cooking Facilities on the Premises? Yes No
If Yes, What type of Fire Protection is Present? _____

Is the Applicant Providing any Overnight Accommodations such as Camping? Yes No
If Yes, Please Describer _____

Will Security be required at this event? _____
Is the Security Provided Armed or Unarmed? _____
If the Event is being held on a Street or Other Public Place of Vehicular Access, what Protection is being Used between the Street and the Sidewalk? _____

Has this Event been held in the past by the Applicant? Yes No
If Yes, For how many Years? _____

Please Describe any Losses or claims in the last 3 years.

Standard Limits of Liability will be offered.	\$ 2,000,000	General Aggregate
	\$ 1,000,000	Products Aggregate
	\$ 1,000,000	Each Occurrence
	\$ 1,000,000	Personal/Adv Injury
	\$ 100,000	Fire Damage
	\$ 5,000	Medical Payments

IF HIGHER LIMITS OF LIABILITY OR ADDITIONAL COVERAGES ARE REQUIRED, PLEASE INDICATE HERE _____

Signature of Applicant _____ **Date** _____
Applicant Email address _____

AGENCY NAME: Pauma/Valley Insurance Agency, Inc.
REPRESENTATIVE: Justina Ossana, Commercial Department Manager
EMAIL ADDRESS: Justina@pvins.com
PHONE: (760) 751-7693

If you have any questions, please do not hesitate to contact me directly. Thank you!