

MUSIC Mobile Home Park Supplemental Application

Applicant's Name _____ Agent Name _____
 _____ Address _____

 Mailing Address _____ Proposed Effective Date:
 _____ From _____ To _____
 Web Address _____ (12:01 am Standard Time at the address of the Applicant)

Applicant is: Individual Corporation Partnership Joint Venture LLC Other _____

Years doing business under current name _____ years Years of Experience _____ years

Have you worked under any other name? Yes No

If yes, please explain: _____

Operating Season: From _____ To _____

Any of following Exposures are Prohibited:

- Unfenced pools or diving boards in excess of 1 meter
- Garbage bumps or landfills
- Uninhabitable property

Limits of Liability Requested

Each Occurrence	\$
Personal & Advertising Injury	\$
Products & Completed Operations Aggregate	\$
General Aggregate	\$
Damages to Premises Rented to you	\$
Medical Expense (any 1 person)	\$
Other Coverages, Restrictions, or Endorsements requested:	
Deductible	\$ BI/PD per Claim - LAE

Exposure(s)

Business Operation: Campground Permanent Park RV Park

Number of permanent spaces: # _____

Number of RV & Camping spaces: # _____

Number of permanent or tourist spaces containing your units rented to others: # _____

MUSIC Mobile Home Park Supplemental Application

- Baseball Fields # _____
- Basketball Courts # _____
- Boat Docks/Slips # _____
- Campgrounds _____
- Golf Course # _____
- Ice Skating Rink # _____
- Playgrounds # _____
- Racquetball # _____
- Saunas # _____
- Spas/Hot Tubs # _____
- Tennis Courts # _____
- Volleyball # _____
- Convenience Store # _____
- Gasoline Pumps # _____
- Propane Tanks Swap # _____
- Restaurants/Lounges # _____
- Bicycle Trails # _____
- Horse Trails # _____
- Streets/Roads # _____
- Club House (including exercise room) # _____
- Lakes (Dam Existence Hazard) # _____
- Recreational Parks # _____
- Boats # _____
- Recreational Rental Equipment (boats, jet-ski, snowmobiles, etc.) # _____
- Saddle Animals for Hire # _____
- Shooting Ranges # _____
- Security Guards # _____
- Swimming Pool # _____

- Total Receipts: _____
- Total Receipts: _____
- Total Receipts: _____
- Total Receipts: _____
- Total Trail Mile(s): _____
- Total Trail Mile(s): _____
- Total Mile(s): _____
- Total Square Ft.: _____
- Total Acres: _____
- Total Acres: _____
- Year, Make & Model: _____
- Year, Make & Model: _____
- Describe: _____
- Describe: _____
- Armed or Unarmed: _____
- Indoor &/or Outdoor? _____

- Any diving boards/platforms or slides? Yes No
- Diving board/slide height? _____ FT
- Any swimming rules posted? Yes No
- If an outdoor pool, is it fenced with a self-latching gate? Yes No
- Any swimming rules & regulations posted? Yes No
- Any safety equipment available (First Aid kit, Life preservers, etc.) on-site? Yes No
- Any certified lifeguard(s) on-duty at all times? Yes No
- Any Ski Lifts/Tows? Yes No

MUSIC Mobile Home Park Supplemental Application

- Any LPG sales &/or equipment maintenance? Yes No
- Any filling operations? Yes No
- Any waterworks &/or sewage treatment/disposal facilities? Yes No
- Is there above ground/underground storage tank? Yes No
- Any facility built on former landfill or dump site? Yes No
- Any wilderness or primitive camping available? Yes No

In the past 3 years has any company ever cancelled, non-renewed, declined or refused to issue similar insurance to you? Yes No

If yes, please describe. _____

Do you have any known events occurred prior to the proposed effective date of this policy that may result in a claim? Yes No

If yes, please describe. _____

Loss History

Date of Loss	Description of Loss	Amount Paid	Amount Reserved	Claims Status (Open or Closed)

Prior Carrier Information

Year	Carrier	Premium

This questionnaire does not bind the Applicant nor the Company to complete the insurance, but it is agreed that the information contained herein shall be part of the basis of the contract should a policy be issued. By signing you are hereby certifying that all information is accurate to the best of your knowledge.

Applicants Signature _____ **Date** _____

Agents Signature _____ **Date** _____

MUSIC Mobile Home Park Supplemental Application