

## Hunting Preserve, Rod & Gun Club, Hunting Lodge, Trap, Skeet and Sporting Clays Application

### Required Attachments

1. All brochures describing any and all services.
2. Liability waiver / hold harmless agreement you require your guests to sign, if applicable.

**Named Insured:** \_\_\_\_\_

Principal Contact: \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

**Location Address (Important):** \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

**Website: www.** \_\_\_\_\_

**Effective Date:** \_\_\_\_\_

**Email:** \_\_\_\_\_

Business Form:     Corporation     Partnership     Individual     LLC     Other

Limit of Liability Requested:     \$500,000 Occurrence     1,000,000 Occurrence

Do you operate any other business from this location:     Yes     No

*(List information below for each business, use a separate sheet to list information if necessary)*

If yes, type of entity:     Corporation     Partnership     Individual     LLC     Other

Description of Business: \_\_\_\_\_

### Prior Carrier Information

	Insurance Carrier	Limits of Liability	Premium
Current Year			
Last Year			
Two Years Ago			

### Additional Insureds, if necessary use another sheet of paper

Name	Complete Address	Interest

THIS IS AN APPLICATION FOR INSURANCE. THIS IS NOT A BINDER OF INSURANCE.

<b>Property Section</b>	<input type="checkbox"/> N/A
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Location Information	
Is your location within 50 miles of the Gulf of Mexico or the Atlantic Ocean?	<input type="checkbox"/> Yes <input type="checkbox"/> No
What is the Fire Protection Class of your location?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Distance to Fire Station?	miles
Is the responding fire department <input type="checkbox"/> staffed    or <input type="checkbox"/> volunteer	
Distance to Fire Hydrant?	feet
Are there other fire control water sources available? <input type="checkbox"/> Pool <input type="checkbox"/> Pond / Lake <input type="checkbox"/> Water Tank <input type="checkbox"/> Other:	
Is your location prone to grass fires and/or forest fires?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there buildings at your facility with limited access due to forest, terrain or season?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are your buildings located in heavily wooded areas?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the clearing from the forest / wooded areas greater than 150 feet?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is your business operational year round?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, provide the number of months you are operational:	months
Are your buildings occupied year round?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, is there a caretaker on site <input type="checkbox"/> Yes <input type="checkbox"/> No    or contracted?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, are buildings winterized?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Basic Property Information	
Are there smoke alarms in all corridors and bedrooms?	<input type="checkbox"/> Yes <input type="checkbox"/> No
What type of powered smoke alarms are installed? <input type="checkbox"/> Battery <input type="checkbox"/> Hardwired	
1. Do any buildings have cooking facilities? If yes, list building numbers.	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Do any buildings have wood burning fireplaces and / or wood stoves? If yes, list building numbers.	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Do any buildings have any ACTIVE Knob & Tube and / Aluminum wiring? If yes, list building numbers.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Dock Information	
Number of Docks?	
Number of Boat Slips?	
<b>Complete the questions below only if property coverage is requested.</b>	
Construction: <input type="checkbox"/> Frame <input type="checkbox"/> Metal <input type="checkbox"/> Floating <input type="checkbox"/> Fixed <input type="checkbox"/> Roofed    Age:	
If roofed, has proper engineering for wind / snow loads been assessed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the water around your dock freeze? <input type="checkbox"/> Yes <input type="checkbox"/> No    If yes, what date on average?	
Are the docks removed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

**Activities Section**

Activities Conducted	# of Guides	# of Units
<input type="checkbox"/> Club Members		Members
<input type="checkbox"/> Acreage-Leased		Acres
<input type="checkbox"/> Acreage-Owned		Acres
<input type="checkbox"/> Archery Range		Stations
<input type="checkbox"/> Range (Rifle & Pistol) - indoor		Lanes
<input type="checkbox"/> Range (Rifle & Pistol) - outdoor		Lanes
<input type="checkbox"/> Sporting Clay		
<input type="checkbox"/> Trap & Skeet		
<input type="checkbox"/> Big Game Hunting		
<input type="checkbox"/> Upland Bird Hunting		
<input type="checkbox"/> Waterfowl Hunting		
<input type="checkbox"/> Lakes or Ponds		
<input type="checkbox"/> Boats		
<input type="checkbox"/> Farming: Crops, Livestock		\$ Revenues
<input type="checkbox"/> Clubhouse		Square Feet
<input type="checkbox"/> Lodging		Rooms
<input type="checkbox"/> Restaurant		
<input type="checkbox"/> Liquor Sales		
<input type="checkbox"/> Retail Store		
<input type="checkbox"/> Docks & Piers		
<input type="checkbox"/> ATV-guided		
<input type="checkbox"/> ATV-unguided		
<input type="checkbox"/> Youth Programs		

**Check all that apply to your operation:**

For Profit    
  Not-for-Profit    
  Open to Public    
  Private Membership

Do you require participants to sign a liability waiver?      Yes      No

How many years have you been operating?     \_\_\_\_\_ Years

If you are a new venture, how many years of prior experience?     \_\_\_\_\_ Years

Are any operations conducted outside of the United States?      Yes      No

Do you hire guides as subcontractors? If yes, for what activities?      Yes      No  
 If yes, do you obtain proof of insurance?      Yes      No

List safety procedures and / or attach safety guidelines on separate sheet of paper.

**Clubhouse / Lodging Section**

N/A

Total number of units / rooms for lodging? \_\_\_\_\_

What is the square footage of the main lodge or clubhouse? \_\_\_\_\_ Square Feet

Number of RV Spaces / Tent Sites? \_\_\_\_\_

Maximum guest capacity is: \_\_\_\_\_

Do you have a swimming pool or swimming area?      Yes      No  
 If yes, do you have a diving board?      Yes      No

Are swimming pools and spas compliant with Virginia Graeme Baker  
 Pool and Spa Safety Act?      Yes      No  
 If no, provide time table and action plan: \_\_\_\_\_

<b>Special Event / Dog Trial Section</b>	<input type="checkbox"/> N/A
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Special Events		
Provide number, revenue, and type of event(s):		\$
Number of:	Participants	
	Spectators	
	Volunteers	
How many field trial events are held annually?		
Number of:		
What is the minimum age of a volunteer gunner – bird boy?		Years

<b>Hunting Section</b>	<input type="checkbox"/> N/A
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What percentage of your hunting operations are unguided?	%
What type of game is being hunted?	
<input type="checkbox"/> Elk <input type="checkbox"/> Deer <input type="checkbox"/> Exotics <input type="checkbox"/> Bear <input type="checkbox"/> Turkey <input type="checkbox"/> Waterfowl <input type="checkbox"/> Upland Birds <input type="checkbox"/> Hogs <input type="checkbox"/> Alligators <input type="checkbox"/> Other:	
Are Tree Stands used?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you use any of the following to transport hunters? If so, how many?	<input type="checkbox"/> ATV's
	<input type="checkbox"/> Horses
	<input type="checkbox"/> Snowmobiles
	<input type="checkbox"/> Boats
	<input type="checkbox"/> Other Unlicensed Vehicles

Exposure Information					
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Use of helmets on ATV's is	<input type="checkbox"/> mandatory	<input type="checkbox"/> frequent	<input type="checkbox"/> rare	<input type="checkbox"/> nonexistent	<input type="checkbox"/> N/A
Use of muzzleloaders is	<input type="checkbox"/> frequent	<input type="checkbox"/> rare	<input type="checkbox"/> nonexistent	<input type="checkbox"/> prohibited	
Use of pistols is	<input type="checkbox"/> frequent	<input type="checkbox"/> rare	<input type="checkbox"/> nonexistent	<input type="checkbox"/> prohibited	
Use of modified weapons is	<input type="checkbox"/> frequent	<input type="checkbox"/> rare	<input type="checkbox"/> nonexistent	<input type="checkbox"/> prohibited	
Tree stand use is	<input type="checkbox"/> frequent	<input type="checkbox"/> rare	<input type="checkbox"/> nonexistent		
Tree stand safety harness use is	<input type="checkbox"/> mandatory	<input type="checkbox"/> frequent	<input type="checkbox"/> rare	<input type="checkbox"/> nonexistent	
Heavy Equipment use is (Tractors, bulldozers, etc.)	<input type="checkbox"/> frequent	<input type="checkbox"/> rare	<input type="checkbox"/> nonexistent		
ATV, Hunting Buggy, Argo use is	<input type="checkbox"/> frequent	<input type="checkbox"/> rare	<input type="checkbox"/> nonexistent		
Snowmobile use is	<input type="checkbox"/> frequent	<input type="checkbox"/> rare	<input type="checkbox"/> nonexistent		
Sponsored youth events are	<input type="checkbox"/> frequent	<input type="checkbox"/> rare	<input type="checkbox"/> nonexistent		
Members sign liability waivers	<input type="checkbox"/> mandatory	<input type="checkbox"/> frequent	<input type="checkbox"/> rare	<input type="checkbox"/> nonexistent	<input type="checkbox"/> N/A
Guests sign liability waivers	<input type="checkbox"/> mandatory	<input type="checkbox"/> frequent	<input type="checkbox"/> rare	<input type="checkbox"/> nonexistent	<input type="checkbox"/> N/A
Clients sign liability waivers	<input type="checkbox"/> mandatory	<input type="checkbox"/> frequent	<input type="checkbox"/> rare	<input type="checkbox"/> nonexistent	<input type="checkbox"/> N/A

**Shooting Range Section**  N/A

Is a rangemaster / supervisor on premise during shooting hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No
What is the minimum age of an unsupervised shooter?	Years Old
Is the premise secured and locked when not operating?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are range rules and safety guidelines posted in a conspicuous manner?	<input type="checkbox"/> Yes <input type="checkbox"/> No
What is the maximum distance of ranges?	Yards
What type and kind of backstop or berm is used? Describe:	

**Watercraft Liability Section**  N/A

**Boat Schedule** *(If necessary use another sheet of paper)*

Year	Make & Model	Length	HP	OB / IB / IO	# Pass	Guided
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No

**Watercraft General Information**

How are boats used?  
 Hunting  Fishing  Boat Rental  Other, describe:

On what bodies of water does use take place?  
 Rivers  Lakes / Ponds  Ocean  Bays / Inlets

If Rivers, what classes are boated:  
 Class I  Class II  Class III  Class IV  Class V

Are life vests (PFD's) required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are life vests (PFD's) provided?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Guide Information Section**  N/A

Name	Age	Years Experience	First Aid Qualifications

**Sales and Revenue Section**  N/A

**Sales Information**

Do you raise game birds for sale to others?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you sell game birds to restaurants or to other food processors?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you sell handguns? <input type="checkbox"/> Yes <input type="checkbox"/> No	How many a year? of handguns
Do you sell used guns? <input type="checkbox"/> Yes <input type="checkbox"/> No	How many a year? of handguns

**Gross Receipts**

<b>Prior 12 Months' Actual Total Receipts:</b>	<b>\$</b>
<b>Estimated Total Receipts for Next 12 Months:</b>	<b>\$</b>
Membership Dues	\$
Rifle / Pistol Range	\$
Shotgun Range / Trap & Skeet	\$
Pro-Shop or Retail Operations	\$
Of this amount, how much is gun sales?	\$
Restaurant Sales	\$
Of this amount, how much is liquor sales?	\$
Lodging	\$
Gunsmithing	\$
Game Bird Sales to Others (preserves, restaurants, etc.)	\$
Other (fundraisers, raffles, dinners, etc.)	\$
<b>Total</b>	<b>\$</b>

**Loss History**

Date	Description of Incident	Amount Paid / Reserved
		\$
		\$

Do you have knowledge of any incident which may led to a claim?  Yes     No  
 If yes, please describe:

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**Fraud Notice**

**NOTICE:** Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act which is a crime and may subject such person to criminal and civil penalties.

**NOTICE TO NEW YORK APPLICANTS:** Any person who knowingly and with intent to defraud any Insurance Company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

**NOTICE TO KENTUCKY APPLICANTS:** Any person who knowingly and with the intent to defraud any Insurance Company or other person files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act which is a crime.

**NOTICE TO MINNESOTA AND OHIO APPLICANTS:** Any person who, with intent to defraud or knowing that he/she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

**NOTICE TO NEBRASKA AND OKLAHOMA APPLICANTS:** Any person who knowingly and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

**NOTICE TO PENNSYLVANIA APPLICANTS:** Any person who knowingly and with intent to defraud any Insurance Company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading information concerning any fact material thereto commits a fraudulent insurance act which is a crime and subjects such person to criminal and civil penalties.

**NOTICE TO FLORIDA APPLICANTS:** Any person who, knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete or misleading information is guilty of a felony in the third degree.

**NOTICE TO NEW JERSEY APPLICANTS:** Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

**NOTICE TO MAINE AND VIRGINIA APPLICANTS:** It is a crime to knowingly provide false, incomplete or misleading information to an Insurance Company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

**NOTICE TO OREGON APPLICANTS:** Any person who knowingly and with intent to defraud or solicit another to defraud an insurer: (1) by submitting an application or (2) by filing a claim containing a false statement as to any material fact, may be violating state law.

**NOTICE TO DISTRICT OF COLUMBIA APPLICANTS:** "Warning: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant."

**NOTICE TO NEW MEXICO APPLICANTS:** "Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to civil fines and criminal penalties."

**NOTICE TO TENNESSEE APPLICANTS:** "It is a crime to knowingly provide false, incomplete or misleading information to an Insurance Company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits."

Insured Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**STATEMENT OF NO KNOWN LOSSES**

I \_\_\_\_\_,  
(Insured's Principal Name)

on behalf of \_\_\_\_\_,  
(Insured's Business Name)

Confirm we have had no claims in the last five (5) years. Further, it is confirmed that we have no knowledge of any accidents or incidents which may give rise to a claim in the last five (5) years.

Any exceptions to this statement are to be described in the box below.

\_\_\_\_\_ signed \_\_\_\_\_  
(Insured's Signature) (Today's Date)

EXCEPTIONS TO THE ABOVE STATEMENT