



Illinois R. B. Jones

A KAUFMAN GROUP COMPANY

Since 1905

Recreational Equipment Liability Application

Named insured _____ Date _____

Form of Business _____ Corporation _____ Partnership _____ Sole Proprietor _____ Other _____

Mailing address _____ Telephone (_____) _____

Internet address (Web Page) _____

City _____ State _____ Zip _____

Location address _____

City _____ State _____ Zip _____

Any off-premise rentals? _____

If so, describe: _____

Desired effective date _____

If yes, provide details _____

Years in business _____

Years experience _____

Type and age of equipment _____

How often is equipment inspected? _____

Are all employees certified in Look/Solomon/Tyrolia?
 yes no

If not, Why? _____

Other certifications _____

Is a waiver/release of liability used? yes no

It is a condition of coverage that a copy of waiver/release form be submitted with this application. No coverage will be provided unless this condition is met.

Do you provide guided activities or instruction?
 yes no

Gross Annual Receipts

Ski Rentals \$	Cross-country Rental Receipts \$
Snowboard Rentals \$	Bike Rental \$
Equipment Sales or Repair Receipts \$	Bike Repair \$
Skate Rental Receipts \$	Jet Ski Rental Receipts \$

Limit Applied For: _____

Do you have a general liability policy on this location(s)? yes no

If yes, who is the carrier? _____

Is this application to include coverage for all premises/operations? yes no

If so, submit an Accord Application.

Provide details of any incurred losses the past three years. _____

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

Date _____ Applicant's Signature _____

Date _____ Agency/Producer Name _____