

NORTHERN CALIFORNIA: (209) 472-7042 - (800) 472-7043 SOUTHERN CALIFORNIA: (714) 550-5050 - (800) 660-1125

SAN DIEGO: (800) 660-1125

License #0705050 **Motel Program Supplemental Application**

(Complete in addition to ACORD General Liability Application)

Nε	ame of Applicant:					
1.	Operation: ☐ Hotel ☐ Motel ☐ Tourist Courts/Cabins ☐ ☐ Other (describe):	-				
		e: Average occupancy rate:%				
	Room rental by the: Hour Day Week	Month Other (describe):				
	Any leased areas?					
	Leased to whom?					
	Operation:	Area:Sq. Ft.				
2.	National affiliation?	Yes No				
	If yes, with whom?					
3.	Recommended by local Chamber of Commerce or An	nerican Automobile Association (AAA)? . 🗌 Yes 🔲 No				
4.	Building information/protection:					
	Number of stories:	Construction:				
	☐ Central station fire alarm ☐ Local fire alarm ☐	☐Emergency lighting ☐Guards ☐Sprinklered				
	☐ Standpipes and hose ☐ Guest rooms have smo	oke detectors				
5.	Annual gross sales for insured's and their concessio	naires' operations:				
	\$Room rental					
	\$Convenience store	Number of stores:				
	\$Food from restaurant	Number of restaurants or lounges:				
	\$Liquor from restaurant or lounge					
	\$Conferences and conventions	Maximum occupancy for premises:				
	\$Number of members:					
	\$Equipment rental (snowmobiles, boats, skis, etc.)Type of equipment:					
	\$Other (describe):					
	\$Total of above					
6.	Other operations/exposures:					
	☐ Baseball fields	☐ Trails				
	Number of fields:	Bike—Number of trail miles:				
	☐ Sports courts (tennis, basketball, racquetball,	☐ Horse— Number of trail miles:				
	volleyball, etc.)	Other (describe):				
	Total number of courts:					

6.	Other operations/exposures (continued):		
	☐ Boats		Spas
	Number of boats:	_	Number of spas:
	Type (sail, power, canoe, etc.):	_	Swimming
	☐ Boat docks or slips		☐ Indoor pool
	Number:	_	Number of pools:
	☐ Club houses (including exercise rooms)		☐ Outdoor pool
	Square footage:	_	(\square In-ground \square Above-ground)
	Lake		Number of pools:
	Number of acres:	_	☐ Bathing beach
	☐ Park		(Ocean beach Lake/river beach)
	Number of acres:	_	Number of beaches:
	☐ Playgrounds		Number of diving boards/slides/rafts:
	Number of playgrounds:	_	Board/slide height:ft.
	☐ Saddle animals		Swimming rules posted?
	Number and describe type of animal:	_	Is outdoor, in-ground pool fenced
	☐ Saunas/hot tubs		with a self-latching gate or sur-
	Number of saunas and hot tubs:	_	rounded by the building with no direct access to roadways or
	☐ Security guards		parking areas?
	Number employed:	_	Life-safety equipment available at
	Number of independent contractors:	_	pool side? Yes No
	Are they: armed unarmed		
	☐ Skeet/trap/archery ranges		
	Number of ranges:	_	
7.	Describe any additional recreational facilities op	erated by you o	or others on the premises:
8.	Security:		
	Employees are required to wear ID badges at all tim	nes	
	Room doors have viewing devices (peep holes)		
	Room doors have deadbolt locks and door chains		Yes No
	Door keys are card keys for electronic locks		
	Adjoining room doors have deadbolt locks		
	Sliding glass doors have security bars or poles withi	n door tracks	Yes No
	Do you release guest names and room numbers to	others?	Yes No
	Do rooms contain security instructions for guests?		Yes No
	Facility has CCTV for monitoring parking and entran	ices	Yes No
9.	Innkeepers liability limit:		
	☐ \$1,000 per occurrence/\$10,000 aggregate		
	\$2,500 per occurrence/\$25,000 aggregate		

APPLICABLE IN THE STATE OF NEW YORK:

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.

FRAUD WARNING:

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.

PRODUCER'S SIGNATURE:	DATE:
APPLICANT'S SIGNATURE:	DATE:
AGENT NAME:	AGENT LICENSE NUMBER: