

Big Sky Underwriters Outfitter/Guide Application

Named Insured:	
Principal Contact:	
Mailing Address:	
Location Address:	
Phone Number:	Fax Number:
Effective Date	Website: www.
Business Form: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Individual <input type="checkbox"/> LLC <input type="checkbox"/> Other	

Limit of Liability Requested:	<input type="checkbox"/> \$ 300,000 Occurrence <input type="checkbox"/> \$ 500,000 Occurrence <input type="checkbox"/> \$1,000,000 Occurrence
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Prior Carrier Information

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

Loss History

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

Do you have knowledge of any incident which may lead to a claim? Yes No

If yes, please describe:

Additional Insureds, if necessary use another sheet of paper

Name	Complete Address	Interest

Required Attachments

1. All brochures describing any and all services; or website address above.
2. The liability waiver/hold harmless agreement you require your guests to sign.
3. Three years hard copy Loss Runs, if unavailable, provide a no loss letter signed by the insured.
4. ACORD forms for other lines requested (Property, Inland Marine, Crime, etc.)

Producing Insurance Agency

AGENCY:			
CONTACT:			
ADDRESS:			
TELEPHONE:		FAX:	

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

Activities				
Activities Conducted	# of Guides	# of Units	User Days	Revenues
<input type="checkbox"/> ATV's				\$
<input type="checkbox"/> Bike Rentals				\$
<input type="checkbox"/> Boating				\$
<input type="checkbox"/> Climbing Wall/Rock Climbing				\$
<input type="checkbox"/> Cross Country Skiing				\$
<input type="checkbox"/> Dog Sled Tours				\$
<input type="checkbox"/> Downhill Skiing				\$
<input type="checkbox"/> Guided Fishing				\$
<input type="checkbox"/> Hay, Skeigh or Wagon Rides				\$
<input type="checkbox"/> Hiking/Backpacking				\$
<input type="checkbox"/> Horseback Riding				\$
<input type="checkbox"/> Hunting				\$
<input type="checkbox"/> Jet Skis or Wave Runners				\$
<input type="checkbox"/> Lodging/Cabin Rentals				\$
<input type="checkbox"/> Mountain Bike Riding				\$
<input type="checkbox"/> Paintball				\$
<input type="checkbox"/> River Tubing				\$
<input type="checkbox"/> Rock Climing				\$
<input type="checkbox"/> Sea Kayak Tours/Rentals				\$
<input type="checkbox"/> Shooting Range - Rifle or Pistol				\$
<input type="checkbox"/> Snowmobiles				\$
<input type="checkbox"/> Water skiing				\$
<input type="checkbox"/> Whitewater Rafting				\$
<input type="checkbox"/> Youth Camps or Programs				\$
<input type="checkbox"/> Other, describe:				\$

Do you use subcontractors for any of the above? Yes No

Operations Information	
1. Do you require your guests to sign a liability waiver?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Do you have a brochure or web page?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. How many years have you been in business?	Years
4. If you are a new venture, how many years of prior experience?	Years
5. Are any operations conducted outside of the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Do you hire guides as subcontractors?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, do you obtain proof of insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No

List safety procedures and/or attached safety guidelines:

Lodging Section N/A

Guest Quarters	
Total number of units for guest rental?	#
Number of RV Spaces/Ten Sites?	#
Maximum guest capacity is:	#
Do all cabins/units have smoke alarms?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Kitchen Operations		<input type="checkbox"/> N/A	
Do you have an automatic extinguishing system over the cooking surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Do you have an automatic fuel shut-off to stove?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Is there a maintenance contract to clean your duct system?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Do you have one or more fire extinguishers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Do you have any deep fat fryers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Is there a bar/lounge on the premises?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, is it open to the general public?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
What are your gross liquor sales?	\$ _____		
What are your gross restaurant sales, not including liquor?	\$ _____		
Of restaurant & liquor sales, what percentage is from people not lodging at the resort?	_____ %		

Retail Operations		<input type="checkbox"/> N/A	
Do you have retail operations for any of the following?			
<input type="checkbox"/> General Store	<input type="checkbox"/> Pro Shop		
<input type="checkbox"/> Liquor Store	<input type="checkbox"/> Restaurant		
What are your total Gross Sales from retail operations?	\$ _____		

Pool and Swimming Areas		<input type="checkbox"/> N/A	
How many of each: # _____ Pools: # _____ Lakes # _____ Other: _____			
Are your swimming facilities open to the general public?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Fenced?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Diving Board?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Locking Gate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Is the depth of pool marked?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are life rings or buoys provided?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Life Guard on Duty?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Pool Rules posted?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Is a trained employee available for emergencies?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Do you have a waterslide?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, what is the length & height of slide? Length _____ / Height _____			

Watercraft Liability Section							<input type="checkbox"/> N/A	
Boat Schedule								
Year	Make & Model	Length	HP	OB/BI/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	

General Information	
What type of operation do you have?	
<input type="checkbox"/> Boat Rentals <input type="checkbox"/> Fishing Trips <input type="checkbox"/> Water Tours <input type="checkbox"/> Hunting <input type="checkbox"/> Other, describe: _____	
On what bodies of water does use take place? <input type="checkbox"/> Rivers <input type="checkbox"/> Lakes <input type="checkbox"/> Bays <input type="checkbox"/> Other	
If Rivers, what classes are boated? <input type="checkbox"/> Class I <input type="checkbox"/> Class II <input type="checkbox"/> Class III <input type="checkbox"/> Class IV <input type="checkbox"/> 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

Canoe and/or Kayak Touring Information		<input type="checkbox"/> N/A
Maximum number of boats rented on the same day?	#	
Average number of boats rented on the same day?	#	
What percent of your operations are unguided?		%
Number of guides?	#	

Equine Section	<input type="checkbox"/> N/A
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Ride Information	
Total number of horses available for guest riding?	
Maximum number of horses in use for guest riding at any one time?	
Average number of horses in use for guest riding at any one time?	
What is the youngest rider you will allow on a horse?	
Do you offer the use of helmets?	
Do you ever allow double riding?	
What percentage of your guests ride:	Western Saddle? % vs English Saddle? %
What percentage of your horse operations are:	Unguided? % vs Guided? %
What is the maximum guide to guest ratio?	# Guides to # Guests
Do you operate pony rides?	
If yes: <input type="checkbox"/> Trail Ride <input type="checkbox"/> Riding Ring <input type="checkbox"/> Hand Led	
<input type="checkbox"/> Other, describe	

Guest & Safety Information	
Do you require guests to complete a physical fitness information form prior to riding?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you pre-screen guest riders and determine ability prior to riding?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do guides carry with them any communication device (2-way radio, cell phone, etc?)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you conduct a pre-ride safety briefing with guests?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you provide a written safety manual of procedures to all staff members? <i>If yes, please provide a copy.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
List reasons why you would decline a person from riding (health, age, weight, alcohol, general, pregnancy):	

Account Information			
Do you board horses for a fee?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many?		
Do you teach or allow your guests to participate in:	<input type="checkbox"/> Dressage	<input type="checkbox"/> Team Penning	<input type="checkbox"/> Barrel Racing
	<input type="checkbox"/> Horse Racing	<input type="checkbox"/> Sleigh Rides	<input type="checkbox"/> Hay Rides
	<input type="checkbox"/> Cattle Drives	<input type="checkbox"/> Roping Cattle	<input type="checkbox"/> Branding Cattle
	<input type="checkbox"/> Horse Jumping	<input type="checkbox"/> Buckboard/Buggy Rides	
	<input type="checkbox"/> Inoculations	<input type="checkbox"/> Handling Livestock	

If you conduct Cattle Drives, what is the number of:	
# _____ Wranglers to # _____ Riders	Maximum Duration: _____ Maximum Distance: _____
If your ranch conducts a Rodeo/Gymkans, describe what activities your guests can participate in:	