

## **TULIP Application**

Agent/Broker:					Date of Application	on:		
Address:								
Contact:			Phone Number:					
Email:			Fax Number:					
This application is	s to be completed by	y the venue/facilit	y requesting liability co	verage for their tena	ant-users.			
SECTION I. APP	LICANT INFORMA	ATION						
1. Name of Applica	nt:							
2. Address:								
3. In business under present management since: 4. Website Address:								
SECTION II. VEN	IUE DETAILS							
1. Name of Venue/	Facility:							
2. Address of Venu	ıe/Facility:							
3. Type of Facility:	☐ Amphitheater	Coliseum	☐ Convention Facility	☐ Shed ☐	Sports Arena	Stadium Coliseum		
	☐ Theater	Other (describe	e):					
4. Buildings:	Year Built:		Construction:					
5. Venue is a(n):	☐ Indoor Facility	Outdoor Facilit	у					
6. Seating Capacity: Permanent Seating: Temporary Seating: Maximum:								
If yes, ha	t-user" policy in place we there been any los					☐ Yes ☐ No ☐ Yes ☐ No		
☐ If yes, attach loss runs.  8. Do you provide in-house security? ☐ Yes ☐ N								
9. Do you hire outside security?								
•	•	tes of insurance an	d to be named as an add	itional insured under t	the security			
company's policy?								
10. Is alcohol ever served at any of the events?								
If yes, who is responsible for providing Liquor Liability?								
	•	ittach details expla	ining your requirements o	of the tenant-user.				
11. Are ushers provided?						Yes No		
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If yes, who is providing?  If applicant is providing, are there certificates of insurance providing.							l	] Applicant	_	☐ Yes ☐ No	
	Limits: Insurer:										
13.		tic participants to provide	e certificates of	insur	ance namii	ng the faci	lity as an addition	al insured?	☐ Yes	☐ No	
11	Incurred Contact Informa	ation.									
14.	Insured Contact Informa		Name					Phone			
You	ur Loss Control Manager										
You	ur General Manager										
Aud	dit Contact										
Acc	Accounts/Business Manager										
e E	CTION III. DATING IN	IEODMATION DEDI	CODMED OD		NT						
-SE	CTION III. RATING IN	IFORMATION – PERF	-URIVIER UR	EVE	IN I						
Type of Events – see below for Eligible Classes  Enter the number of events in the column for the 1-100					Number of Admissions pe						
	Enter the number of events in the column for the			101	1-500 5	01-1,500	1,501-3,000	3,001-5,000	5,001- 10,000	Over 10,000	
admissions per event  TULIP Class 1 # of Events								10,000	10,000		
TUI	LIP Class 2	# of Events									
PR	OMOTER Class 1	# of Events									
PR	OMOTER Class 2	# of Events									
Ext	nibitors, Vendors or Co	oncessionaires	l		I						
Exhibitors Annual Number:											
Vendors or Concessionaires – Food and Beverage						Annual Number:					
Vendors or Concessionaires - Non-Food Sales & Demos (excluding I					oducts Liability) Annual Number:						
Eve	ents more than 10,000	admissions (attach sep	parate schedu	ıle if n		1	·1	1			
#	# List name of event and date(s) below				TULIP	TULIP	PROMOTER	PROMOTER		Estimated no. of admissions for event	
					Class 1	Class 2	Class 1	Class 2	aumissio	ns for event	
							<del>                                     </del>				
							<del>                                     </del>	<del>-</del>			

☐ Yes ☐ No

12. Will there be food and/or drinks served?

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