

[illegible]

**Please note: We must be notified of any date changes prior to the first day of the camp. (If you need to add additional dates after submission, you must complete a new form.)**

1. Number of Years in Business: \_\_\_\_\_ Number of Years Under Present Management: \_\_\_\_\_  
Age of Campground: \_\_\_\_\_

- If yes, name organization: \_\_\_\_\_

- As they are to appear on the policy (MUST be approved by K&K)*

1. List any special activities or events to be held in the coming year: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Is there an emergency procedure program for the campground? ☐ Yes ☐ No

8. Describe rules and enforcement practices:

- If yes, please describe:

11. Do all sleeping rooms have smoke detectors? ☐ Yes ☐ No

12. TYPE OF EXPOSURE	YES	NO	BASIS	RECEIPTS
Camper Sites/Campground Receipts	<input type="checkbox"/>	<input type="checkbox"/>	(#) _____	_____
Hotels/Motels/Cabins	<input type="checkbox"/>	<input type="checkbox"/>	(#) _____	_____
Store	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Concession/Restaurant Receipts	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Liquor Receipts	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
LP Sales	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	(L) _____	_____
Boat/Canoe Rentals	<input type="checkbox"/>	<input type="checkbox"/>	(#) _____	_____
Bike Rentals	<input type="checkbox"/>	<input type="checkbox"/>	(#) _____	_____
Horses (Saddle Animals)	<input type="checkbox"/>	<input type="checkbox"/>	(#) _____	_____
Hay Rides	<input type="checkbox"/>	<input type="checkbox"/>	(#) _____	_____
Tours	<input type="checkbox"/>	<input type="checkbox"/>	(#) _____	_____
Skating (Ice/Roller)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Skiing (Snow/Water)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Scuba Diving	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Mountain/Rock Climbing	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Go Karts	<input type="checkbox"/>	<input type="checkbox"/>	(#) _____	_____
Miniature Golf	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Driving Range	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Golf Course	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Amusement Rides	<input type="checkbox"/>	<input type="checkbox"/>	(#) _____	_____
Water Rides/Slides	<input type="checkbox"/>	<input type="checkbox"/>	(#) _____	_____
Batting Cages	<input type="checkbox"/>	<input type="checkbox"/>	(#) _____	_____
Pool	<input type="checkbox"/>	<input type="checkbox"/>	(#) _____	_____
Sauna/Hot Tub	<input type="checkbox"/>	<input type="checkbox"/>	(#) _____	_____
Swimming Lake or Beach	<input type="checkbox"/>	<input type="checkbox"/>	(#) _____	_____
Day Care	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Picnic Grounds	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Other Rentals (Please specify):				
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Other (Please specify):				
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

**\* Do not include receipts of one exposure in with another exposure.**

## PART D: SITE INFORMATION

1. List any playground equipment and year constructed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Is the ground covered with an appropriate surface cover? ☐ Yes ☐ No
3. Is there an on-site sewage treatment facility? ☐ Yes ☐ No  
If yes, used for: ☐ Campers only ☐ General public
4. How frequently is tank emptied? \_\_\_\_\_
5. Where/how is sewage disposed of? ☐ City/Municipal Sewer System ☐ Drive-away service contracted  
☐ Pumped into pond, cesspool, waterway, or lagoon
6. How often is trash disposed of? \_\_\_\_\_
7. Is liquor sold for consumption? ☐ Yes ☐ No  
If yes: ☐ By the drink ☐ For Carry-Out
8. Are the proper liquor licences obtained/displayed? ☐ Yes ☐ No
9. Is training for servers/sellers of liquor provided? ☐ Yes ☐ No  
If yes, what type: \_\_\_\_\_
10. Is liquor liability insurance requested? ☐ Yes ☐ No
11. Is LPG sold? ☐ Yes ☐ No  
If yes, to: ☐ Campers ☐ General public
12. Capacity of tanks: \_\_\_\_\_ L Are they fenced? ☐ Yes ☐ No Fence height: \_\_\_\_\_
13. Who does the filling of the tanks? \_\_\_\_\_
14. What training has this person had? \_\_\_\_\_
15. Are tanks weighed after filling? ☐ Yes ☐ No
16. Are tanks checked for leaks after filling? ☐ Yes ☐ No
17. Is Certificate of Insurance from supplier on file? ☐ Yes ☐ No
18. Is gasoline sold? ☐ Yes ☐ No  
If yes, is it self-service? ☐ Yes ☐ No
19. Are proper safety signs posted? ☐ Yes ☐ No
20. Are watercraft rented or provided by you to customers? ☐ Yes ☐ No
21. Is operation supervised? ☐ Yes ☐ No
22. Are all boats accounted for at all times? ☐ Yes ☐ No
23. Type, age and length of boats: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
24. Are any boats rented with motors? ☐ Yes ☐ No
25. Type and size of motors: \_\_\_\_\_  
\_\_\_\_\_

26. Maintenance procedures for boats and motors: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

27. Condition of dock: \_\_\_\_\_  
\_\_\_\_\_

28. Are life jackets provided ☐ Yes ☐ No  
If yes, are renters required to wear them? ☐ Yes ☐ No

29. Minimum age of boat renter: \_\_\_\_\_

30. Are boats allowed to stay out after sunset? ☐ Yes ☐ No

31. Number of persons allowed in each boat: \_\_\_\_\_

32. Are renters required to sign waiver form? ☐ Yes ☐ No

33. Do you operate a marina? ☐ Yes ☐ No

34. Are boats and motors repaired for others? ☐ Yes ☐ No

35. How many saddled animals are provided? Rented?

36. Are waivers signed by all riders? ☐ Yes ☐ No

37. Are riders required to wear helmets? ☐ Yes ☐ No

38. Are riders required to wear shoes or boots with heels? ☐ Yes ☐ No

39. Does an employee lead or accompany all riders? ☐ Yes ☐ No

40. Are riders allowed in the stable/barn area without supervision? ☐ Yes ☐ No

41. If campground utilizes a pool:

Used by: ☐ Campers Only ☐ General Public

Is there an admission charge? ☐ Yes ☐ No

Maximum depth of swimming area:

Is it fenced? ☐ Yes ☐ No

If yes, what is the height of the fence? \_\_\_\_\_

Is there a self-locking, self-closing gate? ☐ Yes ☐ No

Is gate secured with a lock when pool not open? ☐ Yes ☐ No

Are depth markings clearly visible on side and walking surfaces of pool? ☐ Yes ☐ No

Number of diving boards: \_\_\_\_\_ Height(s): \_\_\_\_\_

Depth of water at divers entry? \_\_\_\_\_

Number of waterslides/blobs etc.: \_\_\_\_\_

Describe any waterslides/blobs: \_\_\_\_\_  
\_\_\_\_\_

Is a lifeguard provided? ☐ Yes ☐ No

Are rules posted at the pool area? ☐ Yes ☐ No

Is nighttime swimming allowed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is there lifesaving equipment at the pool area?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
42. If campground utilizes a lake, pond or river:		
Used by <input type="checkbox"/> Campers Only <input type="checkbox"/> General Public		
Is signage posted clearly stating the depth of water and the rules for the lake/pond?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is there a beach?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is admission charged?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Maximum depth of swimming area: _____		
Number of diving boards: _____	Height(s): _____	
Depth of water in diving area: _____		
Number of waterslides/blobs etc.: _____		
Describe any waterslides/blobs etc.: _____		
Are there tree swings, bridges, etc.?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is a lifeguard provided?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is a rescue vehicle available?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is there lifesaving equipment at the area?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is nighttime swimming allowed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is any special protection given and/or special supervision utilized to prevent unauthorized use?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
43. Are there other bodies of water on premises (not just those normally utilized)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, are there depth markings, signage, barriers, and/or general supervision utilized to prevent unauthorized use?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

## PART E: REQUIRED UNDERWRITING INFORMATION

Please enclose the following items along with this business information form:

1. one-year Statement of Income
2. campground brochure (if available) or other descriptive information
3. diagram of the premises
4. four-year (including current year) loss information
5. copy of waiver(s) used for boating, saddle animals, etc.

I understand that K&K Insurance Brokers, Inc., or the insuring company, shall be permitted but not obligated to inspect a proposed insured's or an insured's property and operations for underwriting purposes at any time. Neither the right to make an underwriting inspection nor the making thereof nor any report thereon shall constitute an undertaking, on behalf of or for the benefit of any insured, or others, to determine or warrant that such property or operations are safe or healthful, or in compliance with any standards, rules or regulations. Underwriting inspections when conducted are for the sole purpose of determining and/or improving the insurability of certain property and operations and not safety. I also understand that an insured is solely responsible for the safety of its facilities and operations and shall not rely upon any underwriting inspections to determine the safety of its facilities or operations and shall not diminish or forego its own safety practices and procedures.

I understand that this Questionnaire Form will be relied upon by the insurance company in determining whether to provide a quotation for insurance coverage. I hereby warrant, represent and confirm that I have read all of the questions and answers on the Questionnaire Form and that, to the best of my knowledge, all information provided in this form is complete, true and correct.

Name (Print): \_\_\_\_\_ Signature: \_\_\_\_\_  
Date: \_\_\_\_\_