Surplus Insurance Brokers Agency Inc.

Call 800-342-5706
Fax 800-578-7758 ▪ www.surplusins.com
Email quotes: submit@surplusins.com
P O Box 749, South Bend IN 46624-0749

Haunted House Application

Applicant's Name _____

Address _____

City _____ **State** _____ **Zip** _____

Location Address _____

City _____ **State** _____ **Zip** _____

Effective Date _____ Expiration Date _____

Limit of Liability Requested $ _____ Number of Years Event Held _____

Construction of Building: ☐ Frame ☐ Masonry ☐ Noncombustible

Age _____ Number of Stories _____ Number of Exits _____

Are exits lit?	☐ Yes	☐ No
Are all stories used?	☐ Yes	☐ No
If so, are stairwells lit?	☐ Yes	☐ No
If not, are all entrances to the stories not being used properly sealed off and marked?	☐ Yes	☐ No
Is the building sprinklered?	☐ Yes	☐ No
Has the premises been inspected by the Fire Marshall?	☐ Yes	☐ No
Will there be a first aid station?	☐ Yes	☐ No
Are there any slides or moving or dropping floors?	☐ Yes	☐ No
Will there be any touching of patrons?	☐ Yes	☐ No
Are patrons led through the house by guides?	☐ Yes	☐ No

If so, how many guides? _____

List age of guides and/or supervisors: _____

Are guides positioned at the beginning and the end of the groups? ☐ Yes ☐ No

What size groups are taken through at a given time? _____

List specific details of any special effects used (fire, live animals, scare tactics, etc)

_____

_____

_____

Estimated Attendance _____ Charge Per Person $ _____ Estimated Gross Receipts $ _____

Prior carrier and premium _____

Any losses in the past three years? _____

Has insured been cancelled or denied coverage for any reason? ☐ Yes ☐ No

Agent **Agency Name**

Date **Phone** **Fax**