

FAIRWAY UNDERWRITERS, Inc

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The CLUB CHAMPION® SUPPLEMENTAL APPLICATION **ACORDS Plus 3 YEARS (HARD COPY) LOSS RUNS MUST BE SUBMITTED**

1. Named Insured (s): _____
2. Policy Period _____ to _____
3. Are you presently insuring this risk?: ___ Yes ___ No
4. Is Course? ___ Public (Daily Fee) ___ Semi-private ___ Private ___ Municipal ___ Resort
5. # of 9 hole rounds played annually _____
6. # of 18 hole rounds played annually _____
7. For coastal states: Distance to seacoast (miles): _____
8. Number of fire hydrants at premises? _____

KITCHEN AREA

1. Snack bar or restaurant on premises? ___ Yes ___ No
2. Operated by? ___ Insured ___ Concession
3. If deep fat frying or grilling is done, is fire suppression system UL300 compliant? ___ Yes ___ No
4. Annual sales from Snack Bar/Restaurant.....\$ _____

ALCOHOLIC BEVERAGE (If requesting Liquor Law Liability complete this section)

1. Does insured sell/serve alcohol? ___ Yes ___ No
2. Operated by? ___ Insured ___ Concession
3. Do bartenders and/or wait staff participate in alcohol service training programs (TIPS, etc)? ___ Yes ___ No
4. Dance floor on premises? ___ Yes ___ No
5. Live entertainment? ___ Yes Type? _____
6. Annual sales of Liquor/Beer/Wine.....\$ _____

GOLF CART EXPOSURE

1. Explain security for carts to prevent theft and/or vandalism after hours: _____
2. Does insured require a "hold harmless" agreement be signed for all persons leasing a golf cart? ___ Yes ___ No
If yes, attach a copy of the agreement.

SWIMMING POOL

1. Number of swimming pool(s) on premises? _____
2. Is the pool open to the public _____ members only _____ public and members _____
3. Pool depth range ___ feet to ___ feet.
4. Is depth properly marked? ___ Yes ___ No

- 5. Pool fully fenced? Yes No
- 6. Self-closing/Self-Latching Gates? Yes No
- 7. Number of Life Guard(s) on Duty? _____
- 8. Hours on Duty? From To
- 9. Is floatation rope installed? Yes No
- 10. Walkways and decks coated with slip resistant material? Yes No
- 11. Are there any diving boards or slides? Yes No
- 12. Are pool rules posted? Yes No
- 13. Is life saving equipment present and visible? Yes No
- 14. If necessary are anti-vortex drain covers installed? Yes No N/A
- 15. Are handrails installed on steps and/or ladders? Yes No
- 16. Are GFCI breakers/outlets installed? Yes No

ADDITIONAL INFORMATION

1. Explain any non-golf activities conducted at premises (excluding tennis and swimming): _____

IF THE FOLLOWING COVERAGE IS BEING REQUESTED PLEASE COMPLETE:

- 1. Stop Gap Liability Total Payroll \$ _____
- 2. Non-owned & Hired Automobile: Limit: _____ Hired Auto: _____ # of employees: _____

REVENUES (following must be completed for all submissions

Please provide the gross (annual) receipts from the golf course business arising out of the following:

A. Greens fees (public/semi private courses).....	\$ _____
B. Initiation Fees	\$ _____
C. Membership fees.....	\$ _____
D. Guest greens fees (private courses).....	\$ _____
E. Cart rentals	\$ _____
F. Pro shop sales (clubs, clothing, balls, etc).....	\$ _____
G. Snack bar.....	\$ _____
H. Restaurant.....	\$ _____
I. Liquor/Beer/Wine.....	\$ _____
J. Driving range receipts.....	\$ _____
K. Private function receipts (i.e. Weddings).....	\$ _____
*L. Other misc receipts(explain on reverse side).....	\$ _____
Total Annual Gross Receipts	\$ _____

COMMENTS SECTION

Notice to applicants: any person who knowingly and with intent to defraud any insurance company or other person, files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. Completion of this application is not an order for insurance coverage.

_____/_____/_____
Broker's Name Date Phone/Email Agency Name