



EVENTCOVER LIABILITY PROPOSAL

Insured details

Name of Insured:			
Address:			
Period of Insurance: From:	/	/	To: / / at 4pm NZ time
Limit of Liability:	General Liability	<input type="checkbox"/> \$1,000,000	<input type="checkbox"/> Other \$
	Statutory Liability	<input type="checkbox"/> \$1,000,000	<input type="checkbox"/> Other \$

Business details

1.Full description of all activities for which you require insurance:
2.What is your experience in running this or a similar business?
3.Total number of employees/personnel (include volunteers):
4.Annual turnover: \$

Details

1.Location where the activity is carried out:	
2.Total number of participants per event/year:	
3.Total number of clients/tourists/spectators per event/year:	
4.Total number of tours/trips/events undertaken per year:	
4.Does the Event include any dangerous activities*?	Yes <input type="checkbox"/> No <input type="checkbox"/>
5.If Yes, do you supply or manage any of these yourselves, and if so, which?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6. If No to question 5, has evidence of current Liability insurance been obtained from the third party contractors that provide, operate, supply or control any of these activities or equipment?	Yes <input type="checkbox"/> No <input type="checkbox"/>
7. Will there be alcohol available at the event?	Yes <input type="checkbox"/> No <input type="checkbox"/>
8. If Yes, please provide full details of the activities including safety measures and confirmation as to whether you provide or operate any activity or equipment yourselves or if they are provided, operated and supplied by fully insured 3rd party contractors.	

*Dangerous activities include, but are not limited to: Fireworks, bonfires, pyrotechnical devices, inflatable play equipment, fairground rides or mechanically propelled rides of any kind, ballooning, quad bikes, go-karts or motor sport of any kind, trampolines or gymnastic apparatus of any kind, circus acts or stunt acts, shooting ranges for guns or archery. Bouncy castles, inflatable play equipment, slides or rides (mechanical or otherwise) which are set up, operated and taken down by a bona fide sub-contractor who has provided you with evidence of their current public liability insurance, shall not be classed as dangerous activities.

Prior Insurance

Is the Business currently insured for any of the liability covers being applied for?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If 'Yes' please advise: Name of insurer:	Expiry date:	
After investigation has any proposed Insured ever had any insurance:		
(a) declined or cancelled or renewal refused?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
(b) special terms or conditions imposed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
(c) claims declined for this class of insurance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If 'Yes' to either (a), (b) or (c) above, please provide full details including the name of the Insurer.		

Claims and/or loss experience

Have you had any claims, losses, proceedings, notices or complaints, or any fine imposed or any prosecution under any legislation, made against you, or any other person or entity to be insured, whether insured or not. Include any which were below a policy excess or deductible?				Yes <input type="checkbox"/>	No <input type="checkbox"/>
If 'Yes', please provide full details: (Complete on a separate sheet if necessary.)					
Date of Loss	Description of Loss	Total amount of Claim	Loss Insured?		
Are there any claims currently pending against you, or are you aware, after enquiry, of any circumstances that could give rise to a claim under the proposed insurance?				Yes <input type="checkbox"/>	No <input type="checkbox"/>
If 'Yes', please provide full details:					

Declaration of Good Practice

The insured declares that they:

1. have never been prosecuted under the Health and Safety at Work Act or other statute or regulation.
2. have not been convicted of any criminal offence (other than minor driving offences not resulting in disqualification) in the last 5 (five) years
3. have not been declared bankrupt nor been involved in a company or business which has gone into liquidation, receivership or come to an arrangement with creditors in the last 5 years.
4. have not waived any legal rights of recovery against contractors and exhibitors.
5. have checked contracts when booking venues to ensure we are not accepting responsibility for the negligence of the venue owners.
6. require all contractors, performers and suppliers to provide evidence of insurance against third party liability risks before they are permitted on site.
7. require all exhibitors and stallholders to provide evidence of insurance against third party risks before we permit them on site.
8. have carried out and implemented/will implement a written risk assessment in respect of the event.
9. has a written health and safety policy detailing procedures applied to the event that all contractors/exhibitors are made aware of and are required to comply with.

Insured Signature:	Date:
Print Name:	Title: