

## Lifeguard Services, Swimming Pool Management & Servicing General Liability Supplemental Application (Complete in addition to ACORD)

1. Name of Applicant: \_\_\_\_\_

Website Address: \_\_\_\_\_

### GENERAL

2. Check all operations that apply:

- ☐ Lifeguard Services      ☐ Swimming Pool or Lake Management
- ☐ Swimming Pool Servicing-routine maintenance of swimming pools, such as cleaning filters, vacuuming and maintaining proper pH level, but not involved in major repair work
- ☐ Swimming Pool Repair – no major repair      ☐ Swimming Pool Repair – major repair work
- ☐ Swimming Pool Installation
- ☐ Other (describe): \_\_\_\_\_

3. Type of Clients serviced (check all that apply):

- ☐ Apartments      ☐ Condominiums/Homeowners Associations      ☐ Gym Clubs      ☐ Health Clubs
- ☐ Hotels/Motels      ☐ Lakes/Ponds      ☐ Municipal Pools      ☐ Ocean Beaches
- ☐ Private Homeowners      ☐ Swim Clubs      ☐ Water Amusement Parks/Wave Pools
- ☐ Other: \_\_\_\_\_

4. Number of years you have been operating: \_\_\_\_\_

5. Annual Gross Sales: \$ \_\_\_\_\_

6. Please list Payroll Totals as follows:

TYPE OF WORK	NUMBER OF EMPLOYEES	PAYROLL	NO. OF POOLS
Pool Servicing		\$	
Lifeguard Services		\$	
Management – Pools or Lakes		\$	
Other (describe):		\$	
<b>Total Number of Employees:</b>		<b>Total Annual Employee Payroll:</b>	
		\$	
<b>Number of owners: _____</b>		<b>Total Owner Payroll:</b>	
<b>x State Payroll Limitation</b>		\$	
<b>\$ _____ =</b>			
<b>Grand Total Annual Payroll:</b>		<b>\$</b>	

7. Do you use subcontractors? ☐ Yes ☐ No

If yes, please answer questions 8. through 14.

8. Describe subcontracted work: \_\_\_\_\_

9. Annual subcontracted cost (labor and materials): \$ \_\_\_\_\_

10. Do all subcontractors provide Certificates of General Liability Insurance? ☐ Yes ☐ No

11. What General Liability limits do you require of your subcontractors? \$ \_\_\_\_\_ /

12. Are you an additional insured on all certificates received from subcontractors? ☐ Yes ☐ No

13. Is a favorable "hold harmless" agreement part of your contract with subcontractors? ☐ Yes ☐ No

14. How long are certificates kept? \_\_\_\_\_

**SWIMMING POOL OR LAKE MANAGEMENT** ☐ Not Applicable

15. Do you dispense badges needed by patrons who are entering and using private membership pools and facilities? ☐ Yes ☐ No
16. Are you responsible for checking badges? ☐ Yes ☐ No
17. Do you provide security services? ☐ Yes ☐ No
18. Do you provide management of restrooms, showers, snack bars or other amenities? ☐ Yes ☐ No
19. If managing amenities other than restrooms, showers or snack bars, please describe: \_\_\_\_\_

20. Have all employees been trained in how to handle a fecal emergency response? ☐ Yes ☐ No
21. Are "No Swimming Allowed" signs posted during times when swimming is not permitted? ☐ Yes ☐ No

**SWIMMING POOL SERVICING** ☐ Not Applicable

22. Number of pools serviced annually: \_\_\_\_\_
23. Do you install, replace or repair platforms, diving boards, slides, handrails or other accessories? ☐ Yes ☐ No
- If other accessories, please describe: \_\_\_\_\_
24. Please provide details of types of service and repair work performed: \_\_\_\_\_

25. Indicate the procedures you follow when draining pools:

- ☐ Area checked for high water table, underground springs, rainy weather and hills behind pool
- ☐ Hydrostatic relief valve is checked before and after draining
- ☐ Holes are drilled into pool to relieve pressure

26. Do you use chemicals that are EPA approved? ☐ Yes ☐ No
27. How and where are the pool chemicals stored? \_\_\_\_\_
28. Do you keep a chemical log book? ☐ Yes ☐ No
29. Would you like a quote for Coverage for Property Damage from Swimming Pool Elevation? ☐ Yes ☐ No

**(There is a premium charge.)**

**LIFEGUARD SERVICES** ☐ Not Applicable

30. Indicate where you provide lifeguard services:
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Above-Ground Pools | <input type="checkbox"/> Below-Ground Pools              | <input type="checkbox"/> Lake Beaches  |
| <input type="checkbox"/> Ocean Beaches      | <input type="checkbox"/> Pool Parties and Special Events | <input type="checkbox"/> River Beaches |
31. Do you require all pools to be in compliance with the Virginia Graeme Baker Act prior to providing lifeguard services? ☐ Yes ☐ No
32. What is your operating season? From: \_\_\_\_\_ To: \_\_\_\_\_
33. Number of pools guarded annually: \_\_\_\_\_
34. Are all lifeguarded pools fenced and equipped with self-locking gates? ☐ Yes ☐ No
35. Minimum number of lifeguards per pool: \_\_\_\_\_ Total number of lifeguards: \_\_\_\_\_
36. Does the number of lifeguards that you provide comply with state requirements? ☐ Yes ☐ No
37. Maximum number of hours each lifeguard is on duty before shift change: \_\_\_\_\_
38. Are lifeguards required to be American Red Cross Lifesaving Certified? ☐ Yes ☐ No
- If yes, is certification current? ☐ Yes ☐ No
39. Do you provide any training and/or certification of lifeguards? ☐ Yes ☐ No
40. Do you provide diving coaches? ☐ Yes ☐ No
41. What is the age requirement of lifeguards? \_\_\_\_\_

42. Does your hiring procedure include background checks of all potential employees? ☐ Yes ☐ No  
If yes, provide a list of the type of background checks utilized. If no, please explain: \_\_\_\_\_

43. Are lifeguards present during all operating hours? ☐ Yes ☐ No

44. Is a separate lifeguard always stationed at each diving board and each slide? ☐ Yes ☐ No

45. Do lifeguards have whistles and bullhorns so that emergency instructions can be heard by all? ☐ Yes ☐ No

46. Have all employees been trained in how to handle a fecal emergency response? ☐ Yes ☐ No

47. Is there a Lifesaving Emergency Plan in place? ☐ Yes ☐ No

48. Do you require all pools to be equipped with adequate life-saving equipment before you agree to provide lifeguard services? ☐ Yes ☐ No

49. Is the life-saving equipment maintained as required by law or ordinance? ☐ Yes ☐ No

Explain: \_\_\_\_\_

50. Are all pools required to have rules posted? ☐ Yes ☐ No

51. Are "No Swimming Allowed" signs posted during times when swimming is not permitted? ☐ Yes ☐ No

52. Do the pools being guarded have child age requirements in place for children left unaccompanied by a parent or adult guardian? ☐ Yes ☐ No

53. Do you have any clients with wave pools, pools with slides or diving boards/platforms in excess of ten (10) feet? ☐ Yes ☐ No

54. If lifeguarding at a lake, is the swimming area clearly marked by rope and buoys, and segregated from boating areas? ☐ Yes ☐ No

55. If only one lifeguard is present, is he/she also responsible for monitoring, checking, selling or dispensing membership ID cards or badges? ☐ Yes ☐ No

**FOR SEXUAL MOLESTATION COVERAGE, PLEASE COMPLETE QUESTIONS 56. THROUGH 60.**

\$25,000/\$50,000 limit is included at no additional charge. Higher limits are available for an additional premium charge (see below). If sexual molestation coverage is not desired, please check here: ☐ Coverage is NOT requested.

56. Has your facility had any incidents or claims brought against it for sexual molestation or any other allegation of misconduct? ☐ Yes ☐ No

If yes, please provide details: \_\_\_\_\_

57. Has any facility that you have been associated with in the past ever had any incidents occur or claims for sexual molestation or any other allegation of misconduct brought against it while you were there? ☐ Yes ☐ No

If yes, please provide details: \_\_\_\_\_

58. Does your facility perform background checks on all employees and volunteers? ☐ Yes ☐ No

Describe type of checks performed (prior employer, police, sex offender registry, etc.): \_\_\_\_\_

59. Are there written guidelines in place regarding sexual misconduct? ☐ Yes ☐ No

If NO, please explain: \_\_\_\_\_

60. Please check the limits you are requesting:

☐ \$25,000/50,000 (Included) ☐ \$50,000/100,000 ☐ \$100,000/200,000 ☐ \$300,000/300,000

**REMINDER: ACORD APPLICATIONS A125 AND A126 MUST BE COMPLETED AND ATTACHED IN ORDER TO OBTAIN A QUOTE.**

## FRAUD WARNING STATEMENTS

<b>Alabama</b>	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or who knowingly presents false information in an application for insurance is guilty of a crime and may be subject to restitution, fines, or confinement in prison, or any combination thereof.
<b>Arkansas Louisiana West Virginia</b>	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.
<b>Colorado</b>	<b>It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.</b>
<b>District of Columbia</b>	<b>WARNING:</b> It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.
<b>Florida</b>	Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.
<b>Kentucky</b>	Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime.
<b>Maine</b>	It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines, or denial of insurance benefits.
<b>Maryland</b>	Any person who knowingly or willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly or willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.
<b>New Jersey</b>	Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.
<b>New Mexico</b>	<b>ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO CIVIL FINES AND CRIMINAL PENALTIES.</b>
<b>New York</b>	Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.  <b>Fire:</b> 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.
<b>Ohio</b>	Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.
<b>Oklahoma</b>	<b>WARNING:</b> Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.
<b>Oregon</b>	<b>Fire:</b> This entire policy shall be void if, whether before or after a loss, the insured has willfully concealed or misrepresented any material fact or circumstance concerning this insurance or the subject thereof, or the interest of the insured therein, or in case of any fraud or false swearing by the insured relating thereto.
<b>Pennsylvania</b>	Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.
<b>Rhode Island</b>	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.
<b>Tennessee Virginia Washington</b>	It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.
<b>All Other States</b>	Any person who knowingly and willfully presents false information in an application for insurance may be guilty of insurance fraud and subject to fines and confinement in prison.

Applicant's Signature

Date

Title

Producing Agent