

EVENT HOLDER QUESTIONNAIRE

(To be attached to Permit Application – Retain in your files only)

RENTER /EVENT HOLDER NAME AND ADDRESS: (Same as on Permit Form or Rental Form)

Event Contact _____
Person: Email Address: _____
Daytime Phone Number: _____

EVENT INFORMATION:

Date(s) of Event: _____
(Include set-up and take down days)
Classification of Event: _____
(check box) I D II D III D Vendor Only D Instructor: Class I D Class II D Class III D
Hours of the event: _____
Location of Event: (Must enter _____
complete address on certificate) _____

Type of Event: _____
Detailed Description of Event: _____

Total attendance (per day) including all participants, spectators, guests, exhibitors, performers, entertainers, volunteers and employees:

Table with 3 columns: Day One, Day Two, Day Three; Day Four, Day Five, Day Six; Day Seven, Day Eight, Day Nine. Includes a row for Total Attendance ALL Event Days.

ADDITIONAL EVENT EXPOSURES:

Admission Fee Charged? _____
Vendors/Exhibitors/Concessionaires? _____
(Please provide a list of names/what vending, etc.) _____
Caterer? (Please provide name) _____
Liquor Served? _____
Liquor Sold? _____
Food/Non-Alcoholic Beverages Served? _____
Food/Non-Alcoholic Beverages Sold? _____
Entertainment Activities?(Provide a list) _____
Have you held this event or similar event in the past? _____
If yes, have accidents, incidents, claims or loss arisen from such event? _____
How many Vendors? _____

Please review contracts and attach a separate sheet, listing names and addresses of all parties requiring to be named as additional insured.

The event premium includes a premium charge for the facility owner/lessor as additional insured.