

MyBeazley Event Insurance Application

Υοι	ur details			
1.	Name:			
2.	Address:		3. Postcode:	
4.	Policy currency:			
5.	Are you a business with an annual turnover below £2 m	nillion?	Yes	No
6.	Are you a business with less than 10 employees?		Yes	No
7.	Are you the organiser of this event?		Yes	No
Eve	ent details			
8.	Type of event (e.g. conference, festival, football etc:)			
9.	Event name:			
10.	Venue:	11. City	12. Country	
13.	Event start date: DD/MM/YYYY	14. Event end date: DD/MN	M/YYYY	
	/ /	/ /		
15.	Tenancy start date: DD/MM/YYYY	16. Tenancy end date: DD/	MM/YYYY	
	/ /	/ /		
17.	Has this event been held before?		Yes	No
18.	Is the event open to the public?		Yes	No
Eve	ent cancellation			
19.	Please enter the budget information for this event and	tick to confirm the basis on w	hich you wish to ins	sure:
	a) 100% Gross revenue (Total income)*:			
	* Please note that if the event has not been held be (money secured in advance of the event such as p		contracted gross revenue	e only
	b) 100% Costs and expenses:			
20.	Is terrorism cover required?		Yes	No
21.	Where does this event take place? (Please tick one)	Predominantly* indoors		
		Predominantly* outdoors		
		Predominantly* in tempora	ary structures	

*Predominantly means more than 75% of the event



22.	If outdoo	rs or in temporary structures, is cover required for the effects of adverse weather?	Yes	No
23.	If yes to 22, can the event go ahead in continuous moderate rainfall and wind speeds of up to 30mph/50kmh?			No
24.	Does the	Yes	No	
25.	Has this	event ever had any losses as a result of adverse weather, whether insured or not?	Yes	No
26.	Will any stages, marquees or temporary structures be covered on three sides and above, with all electrical equipment protected from weather?			No
Nor	appea	rance (Only complete if non-appearance cover is required)		
27.	Is non-a	ppearance cover required?	Yes	No
28.	Type of r	on-appearance cover required?		
	a)	Key speaker (Key speakers, presenters, hosts involved in a speaking only role) If so, please complete Question 29		
	b)	Individual/Group (Performers, groups or entertainers) If so, please complete Question 29		
	c)	Simultaneous (Covers 25% of participants* due to Common Cause)		
		*Participants are defined as players, athletes, performers or other groups of individuals who are contra event and whose performance is critical to its successful fulfilment	acted to perfo	rm at the
29.	Key spea	ker/Performer details		
	Name Date of birth DD / MM / YYYY			
		/ /		
		/ /		
		/ /		
		/ /		
30.	Are there	e 20 or more participants* in total?	Yes	No
Eve	nt prop	erty (Only complete if property cover is required)		
31.	ls 24 ho	ur security in place at the event site?	Yes	No
32.	What is	he total value of property to be insured?		
Eve	nt mon	ey (Only complete if money cover is required)		

33. What is the total value of money to be insured?



Public liability (Only complete if public liability cover is required)

34.	Event liability limit	1m	2m	5m	10m
35.	Maximum daily attendance				
36.	Total attendance				
37.	Do you have any assets in the USA?			Yes	No
38.	Does the event include any dangerous activities*			Yes	No

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.

39. If Yes, do you supply or manage any of these yourselves, and if so, which?

- 40. If No to question 39, has proof of insurance been obtained from the 3rd party contractors

 Yes

 No
 who provide, operate or supply any of these activities?
- 41. Are there any other activities taking place at the event which need to be considered? Yes No

If so, please provide full details of the activities including safety measures and confirmation as to whether the Insured provides or operates any activity or equipment themselves, or if they are provided, operated and supplied by fully insured 3rd party contractors

Employers liability (Can only be purchased in conjunction with public liability)

- 42. How many employees/volunteers are to be covered at this event?
- 43. Employee Reference Number

 Employer PAYE Reference this can be found on payslips, tax documents etc.

 ERN's normally begin with 3 numbers followed by slash and alphanumeric combination (e.g. 123/AB12345)

Do any employees/volunteers:

- 44. Carry out work at height in excess of 5m or depth of 2m?

 Yes

 No
- 45. Carry out work involving the application of heat, other than the preparation of food and drink? Yes No

Additional information

Please provide any additional information to support your application:

^{*}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.



Event cancellation general questions (Only complete if cancellation cover is required)

46.	Will all contractual arrangements necessary for the successful fulfilment of each event be made and confirmed in writing in a prudent timely manner prior to the start of the event?	Yes	No
47.	Has any event to be insured had any incidents that could have resulted or did result in a loss which would have been covered under this Insurance during the past 5 years?	Yes	No
48.	Are you aware of any matter, fact, circumstance or incident existing or threatened that could possibly affect any event and might result in a claim under the proposed Insurance?	Yes	No

Declaration

I/we declare that the information disclosed on this proposal, is to the best of my/our knowledge and belief both accurate and complete. I/we have taken care not to make any misrepresentation in the disclosure of this information and understand that all information provided is relevant to the acceptance and assessment of this insurance, the terms on which it is accepted and the premium charged.

You must tell us as soon as possible about any changes in this information **you** have provided to **us** which happens before or during any period of insurance. **We** will tell **you** if such change affects **your** insurance and if so, whether the change will result in revised terms and/or premium being applied to **your** policy. If **you** do not inform **us** about a change it may affect any claim **you** make or could result in **your** insurance being invalid.

Yes No



Event liability general questions (Only complete if liability cover is required)

49.	Have any claims for personal injury or damage to property by third parties or employees	Yes	No
	been made against you in the past 5 years?		

Declaration

You declare that you:

- have never been prosecuted under the Health and Safety at Work Act or other statute or regulation
- have not been convicted of any criminal offence (other than minor driving offences not resulting in disqualification) in the last five years
- 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 five years
- have not waived any legal rights of recovery against contractors and exhibitors?
- have checked contracts when booking venues to ensure we are not accepting responsibility for the negligence of the venue owners
- require all contractors, performers and exhibitors to provide evidence of insurance against third party liability risks before they are permitted on site
- require all exhibitors to provide evidence of insurance against third party risks before we permit them on site
- have carried out and implemented/will implement a written risk assessment in respect of the event
- 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

. /		
Yes	N	(

Signature

I/we declare that the information provided above and in all appending sections is true to the best of my/our knowledge.

Signature:		DD	/ MM	/	YYYY
Position:	Date:		/	/	

Underwritten by syndicates 623 and 2623 at Lloyd's. Beazley Solutions Limited is a service company that is part of the Beazley group of companies. Beazley Solutions Limited has authority to enter into contracts of insurance on behalf of the Lloyd's underwriting members of Lloyd's syndicates 623 and 2623 which are managed by Beazley Furlonge Limited. Beazley Solutions Limited is an appointed representative of Beazley Furlonge Limited which is authorised and regulated by the UK Financial Services Authority (Firm Reference Number: 204896) in its capacity as insurer.



Cancellation Plus Proposal Form Addendum

"Cancellation Plus" is a policy extension available to organisers of outdoor events who are buying an event cancellation policy on a gross revenue basis. It provides cover against a drop in "on the day" income at your event following a pre agreed rainfall trigger occurring, and gives you the ability to guarantee a proportion of your income should wet weather keep people away, but not be bad enough to cause cancellation of the event.

Please select the level of rainfall and time period required below, and we will offer a quotation to cover 20% of your 100% gross revenue figure, up to maximum of £50,000.

If you believe the insured weather trigger occurred within the insured time period, contact the Beazley claims team. Using our claims verification sources (Met Office and/or Weather Net) we will verify that the insured trigger was met. If it was, your Cancellation Plus claim will be paid in full.

Cover for alternative limits, rainfall triggers and time windows are available if required.

Your cover

1. I would like to insure against:

5mm of rainfall

10mm of rainfall

15mm of rainfall

20mm of rainfall

Other mm

2. Falling between the hours of am/pm and am/pm (5 hour window max)

3. Postcode of event venue