



# SPECIAL RISK INSURANCE MANAGERS

#103-8411 200<sup>th</sup> STREET, LANGLEY, BC V2Y 0E7 TELEPHONE: (604) 888-0050 FAX: (604) 888-1008

## SUPPLEMENTARY PARADE ORGANIZER QUESTIONNAIRE

### To accompany TULIP application

1. Named Insured: \_\_\_\_\_
2. Dates of parade: \_\_\_\_\_ Beginning and ending hours: \_\_\_\_\_
3. How many years has this parade been held? \_\_\_\_\_
4. What is the current management's experience in organizing this type of event? \_\_\_\_\_  
\_\_\_\_\_
5. Specific location of parade: \_\_\_\_\_  
\_\_\_\_\_

Attach a diagram of the Location (Parade Route from Beginning to End).

6. Will the road(s) be closed in both directions?  Yes  No
7. Number of floats: \_\_\_\_\_ Are floats insured? \_\_\_\_\_
8. Estimated number of participants: \_\_\_\_\_
9. Estimated total spectator attendance: \_\_\_\_\_ Per day: \_\_\_\_\_
10. Describe security protection (number and type): \_\_\_\_\_  
\_\_\_\_\_
11. Describe medical services during parade: \_\_\_\_\_  
\_\_\_\_\_
12. What animals, if any, will be in the parade (number and type)? \_\_\_\_\_  
\_\_\_\_\_
13. Are the animals insured against third-party liability claims by the owners?  Yes  No
14. Are souvenirs or other items allowed to be thrown into the crowd?  Yes  No
15. What concession will be sold? \_\_\_\_\_  
\_\_\_\_\_

16. Will alcoholic beverages be served?  Yes  No Or sold?  Yes  No
16. Previous carrier information:
  - (a) Name of Company: \_\_\_\_\_
  - (b) Limits: \_\_\_\_\_
  - (c) Deductible: \_\_\_\_\_
  - (d) Losses: \_\_\_\_\_

17. Has any insurance carrier cancelled or refused coverage?  Yes  No
18. Will any other underlying coverage be provided?  Yes  No

THE QUESTIONS ON THIS FORM ARE PART OF THE SPECIAL EVENT (TULIP) APPLICATION

DATE

SIGNATURE

TITLE/POSITION