

EVENT PLANNER LIABILITY APPLICATION

DIRECT CLIENT SUBMISSION
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This is an application only. It does not constitute an insurance policy. Insurance shall become effective only upon the issuance of a policy or written binder specifically authorized by the company or agency. Quotations will be based upon the information provided in the application. The applicant warrants the information provided is accurate, true, and complete.

Is the Applicant/Insured the one hired by an event host to plan an event on their behalf? No Yes

If NO, please close this application and complete and submit our ONLINE Special Events Application
<https://www.palcanada.com/index.php/en-us/event-hosts/special-events-liability>

THE INTENT OF THIS EVENT PLANNER POLICY IS TO PROVIDE LIABILITY COVERAGE FOR EVENT-PLANNING OPERATIONS ONLY.

Name of Applicant/Insured: _____

Street Address: _____

City, Province: _____ Postal Code: _____

Contact: _____

Telephone: _____ Fax: _____

Email: _____ Website: _____

Type of Business: Corporation Individual Limited Liability Company
 Partnership/ Joint Venture Trust Other

When was the business established: _____ (MM/DD/YY)

Does the owner have any education, training or work experience within the event planning industry:

No Yes – Describe below

Does the Applicant/Insured provide services other than Event Planning? No Yes

If Yes, describe below: _____

Number of events planned/ organized per year: _____

Annual Gross Receipts: _____

Description of events planned/ organized: _____

Do any of the events planned/organized involve:

- temporary grandstands/ bleachers temporary stage(s) inflatable activity/ bouncy castle
 fireworks or other special effect(s) horses, or other animals

Do all contractors/ suppliers carry their own liability insurance: Yes No

If Yes, will the Applicant be named as an Additional Insured?: Yes No

Effective Date: _____ (12:01 am) To Expiry Date: _____ (12:01 am)
(MM/DD/YYYY) (MM/DD/YYYY)

Limit of Liability: \$1,000,000.00 \$2,000,000.00 \$5,000,000.00

Is E & O Coverage Required? Yes No

Limit of Errors & Omissions: \$1,000,000 \$2,000,000

If any insurance coverage has been declined, cancelled or refused describe below: _____

Loss History (Please include details about any loss related to your business as described on this application. Attach separate sheet if insufficient space): _____

General Comments: _____

Coverage is offered for the event planning operation only. Policy does not extend to the event host; therefore, the insured should advise each client to obtain their own event liability insurance coverage. The intent is to cover the event planner as a subcontractor only hired by event hosts to help with the logistics and the planning of an event, not as an event host.

I/We hereby declare that the answers and declarations above, whether in my own hand or not, are true and that I/We warrant that no material fact has been withheld or misstated and agree that should a policy be issued this Application form will be attached to and form part of the policy and will form the basis of the contract with Underwriters. I/We agree that answers and declarations shall constitute material warranties of any policy issued. I/We further understand that the Underwriters may declare any policy issued void in the event of any false statement, misrepresentation, omission or concealment in the Application form whether made intentionally innocently or accidentally. I/We have been advised and consent to any information that may be perceived as personal information for collection, appropriate use, and disclosure of to third parties.

APPLICANT NAME: _____

Address: _____

City, Province: _____ Postal Code: _____

Telephone: _____ Fax: _____

Email: _____

Signature: _____

Be sure to complete all questions. Incomplete applications will result in a delay in the quotation process.