## **EVENT PLANNER LIABILITY APPLICATION**

DIRECT CLIENT SUBMISSION
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policy or written binde	only. It does not constitute an insurance policy. Insurance shall become effective only upon the issual er specifically authorized by the company or agency. Quotations will be based upon the information propplicant warrants the information provided is accurate, true, and complete.	
Is the Applicant/Insure	red the one hired by an event host to plan an event on their behalf?	
•	is application and complete and submit our ONLINE Special Events Application anada.com/index.php/en-us/event-hosts/special-events-liability	
THE INTENT OF TH OPERATIONS ONLY	HIS EVENT PLANNER POLICY IS TO PROVIDE LIABILITY COVERAGE FOR EVENT-PLAN Y.	NING
Name of Applicant/Ins	sured:	
Street Address:		
City, Province:	Postal Code:	
Contact:		
	Fax:	
Email:	Website:	
Type of Business:	Corporation Individual Limited Liability Company	
	Partnership/ Joint Venture Trust Other	
When was the busines	ss established:	(MM/DD/YY)
Does the owner have a	any education, training or work experience within the event planning industry:	
	— Describe below	
Does the Applicant/Ins	sured provide services other than Event Planning? No Yes	

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) Limit of Liability: \[ \begin{array}{c} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Is E & O Coverage Required?
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:	
insured should advise each client	lanning operation only. Policy does not extend to the event host; therefore, the o obtain their own event liability insurance coverage. The intent is to cover the nly hired by event hosts to help with the logistics and the planning of an event,
material fact has been withheld or miss form part of the policy and will form th constitute material warranties of any p in the event of any false statement, m	and declarations above, whether in my own hand or not, are true and that I/We warrant that no tated and agree that should a policy be issued this Application form will be attached to and a basis of the contract with Underwriters. I/We agree that answers and declarations shall olicy issued. I/We futher understand that the Underwriters may declare any policy issued void srepresentation, omission or concealment in the Application form whether made intentionally en advised and consent to any information that may be perceived as personal information for ure of to third parties.
APPLICANT NAME:	
Address:	
City, Province:	Postal Code:
Telephone:	Fax:
Email:	
Signature:	
Be sure to complete all questions. Inco	mplete applications will result in a delay in the quotation process.