

**HOTEL/MOTEL SUPPLEMENTAL APPLICATION**

Applicant's Name: \_\_\_\_\_

Agent's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Producer Name: \_\_\_\_\_

\_\_\_\_\_

Website Address: \_\_\_\_\_

**Property Locations:**

(Location Name, Street Address)

1. \_\_\_\_\_  
\_\_\_\_\_

Operation:  Motel  Hotel      Number of Rooms: \_\_\_\_\_      Sales: \$ \_\_\_\_\_

Room rented by the:  Hour  Day  Week  Month

**Building Information:**

Central station fire alarm?  Yes  No

Sprinklered?  Yes  No

Guest room have smoke detectors?  Yes  No

Doors have peep holes?  Yes  No

Deadbolt locks?  Yes  No

Non-slip surfaces in tubs/showers?  Yes  No

Restaurants on premises?  Yes  No      Sq. Ft. \_\_\_\_\_

If yes, is restaurant occupied by tenant? \_\_\_\_\_

Does tenant provide a certificate of insurance and name the applicant as an Additional Insured on their policy? \_\_\_\_\_

Does tenant carry GL limits equal to or greater than the applicant's? \_\_\_\_\_

**Swimming Pools:**

No. of Pools \_\_\_\_\_

Diving boards:  Yes  No      Slides:  Yes  No      Underwater Lighting:  Yes  No

Is the pool completely fenced and equipped with a self-latching device?  Yes  No

Are the depth markings clearly shown?  Yes  No

Are warning signs and rules posted and clearly visible?  Yes  No

Is rescue equipment, including a ring buoy and shepherd's hook available at poolside?  Yes  No

Applicant Signature: \_\_\_\_\_      Date: \_\_\_\_\_

Producer Signature: \_\_\_\_\_      Date: \_\_\_\_\_