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Agent Name:

Contact:

Agent Address:

Phone #

Rock Climbing Facilities Supplemental Application

TO BE USED WITH COMMERCIAL GENERAL LIABILITY APPLICATION (ACORD 125)

All questions must be answered in full. Application must be signed and dated by the applicant.

Applicant's Name _____ Agent _____

Applicant Mailing Address _____ Applicant's Phone Number _____

Web Address _____

Inspection Contact _____

Proposed Policy Period _____ to _____ Phone Number for Inspection Contact _____

Applicant is ☐ Individual ☐ Partnership ☐ Corporation ☐ Joint Venture ☐ Other _____

Location #1 _____

Location #2 _____

Location #3 _____

UNDERWRITING INFORMATION

1. What are the annual gross sales? \$ _____
2. Who designed the wall? _____
Who installed it? _____
How is it secured? _____
3. How are guidelines secured; e.g., bolts, eyebolts, etc.? _____
4. Has facility been inspected by local governing unit? ☐ Yes ☐ No
5. Are grasps permanently secured on the wall surface? ☐ Yes ☐ No
Can they be removed and relocated to provide varied climbing strategies? ☐ Yes ☐ No
6. Does the applicant design the climbing routes? ☐ Yes ☐ No
7. Have they followed the recommended placement of grips by the manufacturer? ☐ Yes ☐ No
If yes, who changes the routes? _____
8. Is the wall checked at the beginning of each day to insure all grips are secure? ☐ Yes ☐ No
Is auto belay used exclusively? ☐ Yes ☐ No
9. Height of wall _____ feet Width of wall _____ feet
10. Is the wall permanently affixed or can it be removed and transported to another location? _____
If wall is portable, is it attached to trailer? ☐ Yes ☐ No
11. Is the wall a treadmill style wall? ☐ Yes ☐ No
Does it rotate or left? ☐ Yes ☐ No
12. What is the maximum number of people permitted on the wall at any one time? _____
13. Do all climbers have belay experience and/or provided with a spotter? ☐ Yes ☐ No
14. Are climbers permitted to climb without harness or safety equipment? ☐ Yes ☐ No
If yes, describe. _____

UNDERWRITING INFORMATION (Continued)

15. Does the applicant provide climbing instruction? ☐ Yes ☐ No
If yes, what age groups? _____ What is the ratio of instructors to students? _____
16. What is the floor surface? _____
17. Does the applicant have a pro shop? ☐ Yes ☐ No
18. Do you rent equipment? ☐ Yes ☐ No
If yes, explain. _____
19. Is the rental limited to on premises only? ☐ Yes ☐ No
20. Is the equipment checked each day prior to use? ☐ Yes ☐ No
21. Does the applicant have a waiver/hold harmless signed by all users? ☐ Yes ☐ No
If yes, **attach** a copy for our review.
22. Are minors permitted to use the facility? ☐ Yes ☐ No
If yes, under what conditions? _____
23. Minimum age of participants? _____ Minimum height requirement? _____
24. What is the experience of employees? _____
25. Any out door climbing? ☐ Yes ☐ No
If yes, provide details _____
26. Is this a membership facility? ☐ Yes ☐ No
27. Are safety rules posted? ☐ Yes ☐ No

This application shall not be binding unless and until confirmation by the Company or its duly appointed representatives has been given, and that a policy shall be issued and a payment shall be made, and then only as of the commencement date of said policy and in accordance with all terms thereof. The said applicant hereby covenants and agrees that the foregoing statements and answers are a full and true statement of all the facts and circumstances with regard to the risk to be insured, and the same are hereby made the basis and conditions of the insurance and a warranty on the part of the Insured.

Producer's Signature

Date

Applicant's Signature

Date

IMPORTANT NOTICE

As part of our underwriting procedure, a routine inquiry may be made to obtain applicable information concerning character, general reputation, personal characteristics, and mode of living. Upon written request, additional information as to the nature and scope of the report, if one is made, will be provided.

FRAUD STATEMENT

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.