

Hotel/Motel Supplemental

Email completed application to submit@midman.com. Requested Effective Date: _____

PRODUCER INFORMATION						
Agency Name:		Producer Number:				
Agent Name:		Agent Phone Number:				
APPLICANT INFORMATION						
Name:						
Insured Location:						
Mailing Address:						
OPERATION						
	Hotel	Motel	Tourist	Resort	Dude Ranch	Physical
	Other (describe):					
Number of Rooms:		Average Room Charge:		Average Occupancy Rate:		%
Room Rental by the:	Hour	Day	Week	Month	Other (describe)	
Leased Areas:	Yes	No	Leased to whom?			
Operation:					Area:	sq. ft.
NATIONAL AFFILIATION						
National Affiliation:	Yes	No	If yes, with whom:			
Recommended by Local Chamber of Commerce or American Automobile Association (AAA):	Yes	No				
BUILDING INFORMATION/PROTECTION						
Number of Stories:		Construction:				
Central Station Fire Alarm	Local Fire Alarm			Emergency Lighting		
Sprinkler System	Non-slip Surfaces in Tubs/Shower			Deadbolt Locks		
Standpipes and Hose	Smoke Detectors in Guest Rooms			Peep Holes		
ANNUAL GROSS SALES FOR INSURED'S AND THEIR CONCESSIONAIR OPERATIONS						
Room Rental:	\$	Number of Stores:				
Convenience Store:	\$	Number of Restaurants or Lounges:				
Food from Restaurant:	\$	Maximum Occupancy for Premises:				
Liquor from Restaurant/Lounge:	\$	Number of Members:				
Conferences & Conventions:	\$	Type of Equipment:				
Health or Swim Club:	\$	Describe:				
Equipment Rental (snowmobiles, boats, skis etc.):	\$					
Other:	\$					
Total of Above:	\$					

OTHER OPERATIONS/EXPOSURES									
Number of Baseball Fields:				Number of Sports Courts (<i>tennis, basketball, racquetball, volleyball, etc.</i>):					
Trail Miles:				Bike Miles:				Horse Miles:	
Other (<i>describe</i>):									
Number of Boats:				Type (<i>sail, power, canoe, etc.</i>):					
Number of Boat Docks or Slips:				Number of Clubhouses (<i>including exercise rooms</i>):				Square Footage:	
Number of Acres of Lake:				Number of Acres of Park:					
Number of Playgrounds:				Number of Skeet/Trap/Archery Ranges:					
Number of Saddle Animals:				Type of Animal:					
Number of Saunas/Hot Tubs:				Number of Spas:				Number of Indoor Pools:	
Number of Outdoor Pools:				In-ground		Above-ground			
Number of Bathing Beaches:				Ocean Beach		Lake/River Beach			
Number of Diving Boards/Slides/Rafts:				Board/Slide Height:		ft.			
Swimming pool rules posted?						Yes		No	
Is outdoor, in-ground pool fenced with a self-latching gate or surrounded by the building with no direct access to roadways or parking areas?						Yes		No	
Life-safety equipment available at pool side?						Yes		No	
Describe any additional recreational facilities operated by you or others on the premises.									

CLIENTELE									
Elderly:				Spring Break Crowd:				Resident Housing:	
Room Registration:		Monthly:		Weekly:		Daily:			

SECURITY									
Employees are required to wear ID badges at all time?						Yes		No	
Room doors have viewing devices (peep holes)?						Yes		No	
Room doors have deadbolt locks and door chains?						Yes		No	
Door keys are card keys for electronic locks?						Yes		No	
Adjoining room doors have security bars or poles within door tracks?						Yes		No	
Sliding glass doors have security bars or poles within door tracks?						Yes		No	
Do you release guests' names and room numbers to others?						Yes		No	
Do rooms contain security instructions for guests?						Yes		No	
Facility has CCTV for monitoring parking and entrances?						Yes		No	

DECLARATION											
Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. This application does not bind any of the parties to complete the insurance transaction.											
Applicant's Signature:							Producer Signature:				
Date:											

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