

VENDOR INSURANCE PROGRAM

A Liability Insurance Program Providing Protection from Lawsuits of Bodily Injury and/or Property Damage

To apply for coverage: Please fill out the information below and send with the appropriate premium. All interested vendors for Earth Party 2015, may sign up at the group rate of \$38.60, if received by Southwest Special Risk Insurance by March 15, 2015. After March 11, 2014, the premium will be the single vendor rate of \$52.50. Single vendor coverage may be purchased for longer periods of time to insure numerous events throughout the year.

Part I Proposed Policyholder *Please print or type*

- a. Full Legal Name of Proposed Policyholder _____
- b. Mailing Address _____
Street City State Zip
- c. Contact Person _____
Phone Number _____ Email Address _____
- d. Requested Effective Date _____ Requested Termination Date _____
- e. Description of Exhibit/Goods _____

Excluded Vendor Types:

Body piercing or tattooing; E-commerce selling; Fireworks sales & displays; Hot wax impressions; Live animals; Massage; Medical testing; Motor sports activities; Nutritional/health supplements; On-site installation/service/repair of products; On-site equipment rental; Oxygen/aromatherapy; Storefront operations; Time share sales; Tobacco products; Vehicles in motion; Watercraft exhibits on water; Weapon sales; Weight-loss plans or products; Wholesale business; Medical marijuana and/or paraphernalia.

PLEASE NOTE: *Catering Companies; Christmas tree retail lots; Corn or Hay mazes; Disc-Jockeys for events with over 200 attendees; Haunted House attractions; Live Bands; Mechanical or inflatable amusement devices; Food Truck Vendors and Entertainment & Film Industry Vendors are not eligible under this program, however you can apply to receive a quotation.*

- f. Has any prior coverage been cancelled or non-renewed? Yes _____ No _____

If yes, please describe and provide loss history:

_____ *Policy will become effective on the requested Effective Date if (a) all required information is provided and (b) the Company has received the initial premium on or before that date.*

Part II Premium Rates and Benefits (minimum premiums are fully earned)

\$1,000,000.00 Per Occurrence / \$3,000,000.00 Aggregate

Premium Rates and Benefits SINGLE VENDOR

- Program Rate Vendor 5 days or less: \$ 52.50 (Subject to \$52.50 MP)
- Program Rate Vendor 6 - 14 days: \$105.00 (Subject to \$105.00 MP)
- Program Rate Vendor 15 - 30 days: \$157.50 (Subject to \$157.50 MP)
- Program Rate Vendor 1 – 6 months: \$288.75 (Subject to \$288.75 MP)
- Program Rate Vendor 6 – 12 months: \$367.50 (Subject to \$367.50 MP)

Premium Rates and Benefits GROUP VENDOR POLICIES

- Groups of 2 or more Vendors; 5 days or less: \$ 36.75 per vendor**

**** Group policies are intended for vendors at the same event.**

****MP = Minimum Premium**

Part III Premium Calculation:

Number of Vendors _____ X Premium per Vendor \$ _____ = \$ _____

Part IV Additional Insured Information: (Please provide name and complete address.)

- Fort Worth Magnolia Green Association, Suite 1212, 500 West 7th St., Fort Worth, TX 76102
- Pennsylvania Avenue, L.P., Suite 1212, 500 West 7th St., Fort Worth, TX 76102
- Red Oak Reality, LLC, 500 West 7th St., Suite 1212, Fort Worth, TX 76102
- City of Fort Worth, 1000 Throckmorton, Fort Worth, TX 76102

Send completed application along with the premium to: Southwest Special Risk Insurance
3116 West 5th Street, Suite 106
Fort Worth, TX 76107

Questions? Please call Jill Faulder at (817) 923-1111.