

ClubPac
"2010"
Renewal Information Update

Date

The ClubPac Program is continuously reviewed and updated. Annual summaries of the key changes to the program are posted on our website. Please refer to these summaries to understand how these changes may affect your club.

Club Name: _____ Pol. # SIB _____

Mailing Address: _____

Actual Location: _____

Contact Name: _____

Tel # _____ Fax # _____

E-mail _____ Website: _____

Ann. Receipts: Liquor \$ _____ Food \$ _____ Dues \$ _____

Greens Fees \$ _____ Other \$ _____

of Class "A" Employees: _____

Are ALL employees covered by Provincial Workers' Compensation Yes No

Independent Sub-Contractors :

ProShop Yes No; Name: _____

Restaurant Yes No; Name: _____

Other Yes No; Name and activity: _____

Do all independent contractors sign written contracts including waivers & indemnity agreements

Yes No



Are all independent contractors required by contract to carry liability insurance including All Risks Tenant's Legal Liability and including the club as an additional Insured Yes No
[Attach a copy of the latest Liability Insurance Certificate showing the club as an additional insured.]

Liability WAIVERS and INDEMNITY AGREEMENTS:

Do all Event Sponsors (Tournaments, Banquets, Weddings, etc.) sign written contracts including both waivers and indemnity clauses ? Yes No

Do members sign written waivers and indemnity agreements as part of their membership application and/or membership renewal application ? Yes No

Do "pay as you play" golfers and resort guest golfers sign written waiver and indemnity agreements as part of their check-in procedure ? Yes No

[Clubs with applicable waiver and indemnity agreements in place receive preferred liability premium rates and waived liability coverage deductibles.]

Other activities not usual to a golf club: Batting Cages _____ Rental Boats _____ Skating/Hockey _____

Other _____

Please describe any "Unique" or "Unusual" liability exposures that exist at this club _____

INSURED VALUES

Property of Every Description

We strongly recommend that the club obtain a professional evaluation of the buildings & contents or complete the most recent ClubPac Value Estimator.

The Commercial Building Construction Cost Index has increased more than 15% in the past 24 months. Statscan expects that the CBCCI will increase another 8% to 12%, depending upon location, during 2009. Insured Values should be increased to account for both the past twelve months and the coming twelve months.

WE STRONGLY RECOMMEND THAT CLUBPAC RENEWALS IN 2010 BE SUBJECT TO A MINIMUM INSURED PROPERTY VALUE INCREASE OF 10%.

Statement of Values:

[All Statement of values fields MUST BE FILLED IN. All fields are NUMERIC only. If coverage is not required, type in 0. DO NOT use dollar signs (\$). Items marked "0" or left blank will be excluded from coverage.]

Foundations to be included ? Yes No

Clubhouse Building _____



Optional By-Laws	_____	
Unspecified Clubhouse Contents	_____	
Food & Beverage Inventory	_____	
ProShop Building	_____	
ProShop Equipment	_____	
ProShop Inventory (if owned)	_____	
Paved Driveways, & Parking Lots	_____	include <input type="checkbox"/> Yes <input type="checkbox"/> No
Maintenance Building # 1	_____	
Maintenance Building # 2	_____	
Optional Outbuildings By-Laws	_____	
Fertilizers/Seeds/Chemicals	_____	
Cart Storage Building	_____	
Tennis Bubble	_____	
Swimming Pool	_____	
Curling Rink	_____	
Ice Compressors	_____	
Mini Putt Fixtures	_____	
Dwelling	_____	
Halfway House & Contents	_____	
Shelters/Washrooms	_____	
Starter's Building	_____	
Pumphouse	_____	
Pumps, Controls & Satellites	_____	
Underground Irrigation System	_____	Include <input type="checkbox"/> Yes <input type="checkbox"/> No
& Sprinkler Heads.		
Safety Netting & Poles	_____	Insure <input type="checkbox"/> Yes <input type="checkbox"/> No
Driving Range Fixtures	_____	
Range Balls	_____	
Pull Carts	_____	
Bridges	_____	
Fencing	_____	
Tents / Fabric Structures	_____	
Exterior Lighting	_____	



Misc. Course Fixtures _____
 Other _____
 Other _____
 Other _____

Total Property of Every Description _____

COVERAGE REQUIRED

Greenskeeping Equipment _____ Repl. Cost A.C.V.
 Golf Carts: # _____ Repl. Cost A.C.V.
 Power Tools and Hand Tools _____
 Other Maintenance Equipment _____
 (i.e. welders, hoists etc...)

Total Equipment & Carts _____

COVERAGE REQUIRED

Weight of Ice & Snow (Finished portions of the main clubhouse automatically included)

Main Clubhouse **Included**
 Other Buildings & Contents \$100,000. \$250,000.

Course & Greens Coverage (Named Perils, excluding Windstorm & Hail; \$100,000. incl.)

Increased Limits: \$200,000 \$300,000. \$400,000. \$500,000.
 Increased Limit per Hole: \$50,000. \$75,000.

Enhanced Perils: **Yes** (Windstorm & Hail, Mudslide, Landslide, Storm Runoff Washout, Flood, Accidental Chemical, & Earthquake)
 (\$50,000. deductible except \$250,000. Earthquake & \$10,000. Windstorm & Hail.)

Business Interruption Limit _____ (\$100,000. incl.)

50% Dues Re-imburement: **Yes** **No**; (\$ _____ **Total Annual Dues**)



Forced Course Closure (\$5,000. per week; max. 5 weeks incl.)

Weekly Limit: \$5,000. \$10,000. \$15,000.

Maximum Indemnity Period: 10 weeks 20 Weeks

Pandemic Outbreak Expense (\$1,000. per day; max. 20 days incl.)

Daily Limit: \$2,500. \$5,000.

Extra Expense Limit _____ (\$50,000. incl.)

Form: (40%-70%-90%-100%) 100% Immediate

Critical Illness (\$10,000. two (2) "Named Insureds" under the age of 65, included)

Name	Date of Birth	
_____	D ____ M ____ Y ____	<input type="checkbox"/> Male <input type="checkbox"/> Female
_____	D ____ M ____ Y ____	<input type="checkbox"/> Male <input type="checkbox"/> Female

(Only "Named" Insureds or their replacement are covered.)

Money & Securities (3-D Bond) _____ (maximum \$25,000.)

Employee Bond (Form "A") \$50,000. \$100,000. \$250,000. \$500,000.

(Supplementary application required for bond limits over \$25,000.)

Safe Yes No

Umbrella Liability

\$5,000,000. \$10,000,000.

Underlying Automobile Insurance (minimum \$2,000,000.)

Policy #	_____	_____	_____
Insurer	_____	_____	_____
TP Liability Premium	_____	_____	_____

Directors' & Officers' Liability (Supplemental D&O application required PRIOR to binding)

Corporate Type Non-Profit or Society
 For Profit acting as a Non-Profit
 Small For Profit (under \$2,000,000. revenues)



For Profit

Limit \$1,000,000. \$2,000,000. \$5,000,000.

Deductible \$1,000. \$2,500. \$5,000.

Employment Practices Liability (\$250,000. – 10% min. \$2,500. deductible) Yes No

Boiler & Machinery (Automatically Included)

Changes in Risk Description and/or Protection:

Please ensure the accuracy and completeness of your responses. The Insurer(s) rely upon the information provided on this form to appropriately consider the risk, set rates and place adequate re-insurance. Incorrect or incomplete information could result in serious penalty or shortage of coverage in the event of a loss.

Completed By: _____ Date: _____

Signature: _____



Associated Broker (Sub-Broker)

Information Update

(Please help us keep our contact information up to date.)

Sub-Broker/Agent Name _____

Sub-Broker/Agent Address _____

Contact Name _____ Contact Title _____

Tel # _____ Fax # _____

E-mail Address _____

Is your office the incumbent Broker/Agent? Yes No

Are you licensed in the province where the risk is located? Yes No

Do you have \$1,000,000? Errors & Omissions Insurance in force? Yes No

Do you have \$2,000,000? CGL insurance in force? Yes No

Do you have \$100,000? Fidelity Bond in force? Yes No

Are you licensed to collect provincial sales tax? (Ont., Que., Nfld.) Yes No

If so: Sales Tax License Number _____

Have you read the broker's Terms of Placement on our website? Yes

Other Notes or Comments _____

