

GILLINGHAM & ASSOCIATES

a division of Philadelphia Insurance Companies



WHITE WATER RAFTING SUPPLEMENTAL APPLICATION*

*to accompany General Application

SUBMISSION REQUIREMENTS

- Copy of your excursion / rental sheet(s)
- Copy of waivers / releases
- Safety guidelines and / or Safety program
- Brochure(s) or website address
- Any information that will help us better understand your business

GENERAL INFORMATION

1. Named Insured:
2. Location of Operation:
3. Annual Gross Revenue: \$
4. Please list any associations of which you are a member:
5. Number of years in business: Years
6. Total years of experience in this type of business: Years

GUIDE INFORMATION

1. Trips are: Guided and / or Unguided
2. Describe your guidelines for client to guide ratio:
3. Describe your pre-trip safety orientation and confirm that you have a written outline / guideline:
4. Are trip logs maintained by each guide or outfitter? Yes No
If yes, are they kept for three or more years? Yes No
5. Do guides or trip leaders have training in any of the following:

First Aid	Yes	No
Emergency First Response	Yes	No
River Rescue	Yes	No
Swift Water Rescue	Yes	No
Wilderness First Response	Yes	No
Other, please describe:		
6. Are first aid kits and safety throw ropes carried on all trips? Yes No
7. Is a communication device(s) available on all trips (cell phone, two way radio, etc.)? Yes No
8. Are all guides licensed per your state or government agency's guidelines? Yes No
If yes, please provide copy(s) of guidelines or regulations.
9. Have you ever had any license or permit revoked? Yes No
If yes, please explain:

Name of Guide	Trip Leader?	Years of Experience	Age	Qualifications
1.				
2.				
3.				
4.				
5.				
6.				
7.				

Attach additional sheet if necessary.

Gillingham & Associates ▪ A Member of Philadelphia Insurance Companies
 8501 Turnpike Drive, Suite 200 ▪ Westminster, CO 80031
 Toll Free: 800-849-9288 ▪ In Colorado: 303-428-5400 ▪ Fax: 303-428-5900
www.outdoorinsurance.com ▪ www.phly.com

TRIP INFORMATION

1. Trips are on what class of river?

I	%	II	%	III	%	IV	%	V	%
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2. Are all guests required to wear a Type III or better PFD? Yes No
3. Are helmets offered and worn on all class IV or V water? Yes No
4. Do you provide optional wet suits for guests? Yes No
 Under what circumstances, if any, would wet suits be mandatory?
5. Under what circumstances would you refuse admittance / service to a customer?
6. What is your normal operating season? _____ to _____
7. Length of trips: _____ days Duration: _____ hours per day
8. Please describe your guidelines for minimum age requirement for guests:
9. Minimum age guidelines to raft a Class III or higher river? Years Old
10. Are two or more guides always present on Class III or higher river trips? Yes No
 If no, please explain:

WATERCRAFT INFORMATION

	Total Number Owned	Average Number Used Daily
Rafts		
Canoes		
Kayaks (non-inflatable)		
Inflatable Kayaks		
Other:		

1. Please describe your regular schedule for equipment inspection and maintenance:

RIVER INFORMATION (use separate sheet if necessary)

River Rafted (name / description)	Class of River	Location of River	# of People per Water Vessel	User Days
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

Fraud Notice

NOTICE TO APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT WHICH IS A CRIME AND MAY SUBJECT SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

NOTICE TO NEW YORK APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SHALL ALSO BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED FIVE THOUSAND DOLLARS AND THE STATED VALUE OF THE CLAIM FOR EACH SUCH VIOLATION.

NOTICE TO KENTUCKY APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT WHICH IS A CRIME.

NOTICE TO MINNESOTA AND OHIO APPLICANTS: ANY PERSON WHO, WITH INTENT TO DEFRAUD OR KNOWING THAT HE/SHE IS FACILITATING A FRAUD AGAINST AN INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT IS GUILTY OF INSURANCE FRAUD.

NOTICE TO NEBRASKA AND OKLAHOMA APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD OR DECEIVE ANY INSURER, MAKES ANY CLAIM FOR THE PROCEEDS OF AN INSURANCE POLICY CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY.

NOTICE TO PENNSYLVANIA APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT WHICH IS A CRIME AND SUBJECTS SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

NOTICE TO FLORIDA APPLICANTS: ANY PERSON WHO, KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

NOTICE TO NEW JERSEY APPLICANTS: ANY PERSON WHO INCLUDES ANY FALSE OR MISLEADING INFORMATION ON AN APPLICATION FOR AN INSURANCE POLICY IS SUBJECT TO CRIMINAL AND CIVIL PENALTIES.

NOTICE TO MAINE AND VIRGINIA APPLICANTS: IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES AND DENIAL OF INSURANCE BENEFITS.

NOTICE TO OREGON APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD OR SOLICIT ANOTHER TO DEFRAUD AN INSURER: (1) BY SUBMITTING AN APPLICATION, OR (2) BY FILING A CLAIM CONTAINING A FALSE STATEMENT AS TO ANY MATERIAL FACT, MAY BE VIOLATING STATE LAW.

NOTICE TO DISTRICT OF COLUMBIA APPLICANTS: "WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY OTHER PERSON. PENALTIES INCLUDE IMPRISONMENT AND/OR FINES. IN ADDITION, AN INSURER MAY DENY INSURANCE BENEFITS IF FALSE INFORMATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED BY THE APPLICANT."

NOTICE TO NEW MEXICO APPLICANTS: "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 CIVIL FINES AND CRIMINAL PENALTIES."

NOTICE TO TENNESSEE APPLICANTS: "IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES AND DENIAL OF INSURANCE BENEFITS."

Insured Signature : _____ Date:

Agent Signature: _____ Date:

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