



Club Name:

Effective Date:

1. General Information

- | | | | | |
|--|---------------------|------------------------|-------|----|
| 1. Number of Members | 2. Number of Holes | 3. Number of Employees | | |
| 4. Estimated gross annual receipts for the following: (Not needed if income statement or audited financials are included with submission) | | | | |
| Membership Dues/Initiation Fees | | \$ | <hr/> | |
| All Other Fees (Greens, Golf Carts, Tournaments, etc.) | | \$ | <hr/> | |
| Pro Shop Merchandise Revenue (if owned) | | \$ | <hr/> | |
| Snack Bar/Restaurant Receipts (excluding liquor) | | \$ | <hr/> | |
| Liquor Sales | | \$ | <hr/> | |
| 5. Homeowners Association? If yes, a separate Application is required | | | Yes | No |
| 6. Number of Rounds Played per Year | | | | |
| 7. Amenities offered (check all that apply): Separate Application Required When Indicated | | | | |
| Beauty Shops | Horseback Riding | Hunting | | |
| Private Beach * | Marina/Yacht Club * | Watercraft * | | |
| Ice Skating* | PGA/LPGA Events * | Spa* | | |
| Fitness Center/Gym | Sports Bubble * | Skeet Trap Shooting * | | |
| Other (Please provide a brief description of these amenities): | | | | |
| | | | | |
| 8. Is the "Golf Pro" an: | | | | |
| | Employee | Independent Contractor | | |
| Is the Pro Shop: | | | | |
| | Owned by the Club | Operated Independently | | |
| If operated independently, does club obtain a Certificate of Insurance from the Pro? | | | Yes | No |
| 9. Is there a Risk Transfer program in place including obtaining Certificates of Insurance and favorable hold harmless contracts from all vendors? | | | | |
| | | | Yes | No |
| 10. Does the club require a signed contract that includes an indemnification clause in favor of the insured with all entities who hold an event at the club? | | | | |
| | | | Yes | No |
| 11. Does the club have a formal, written safety program? | | | | |
| | | | Yes | No |
| 12. Have membership by-laws and guidelines been reviewed and approved by legal counsel within the last 3 years? | | | | |
| | | | Yes | No |
| 13. Does the insured perform weekly inspections of the golf course including cart path conditions, bridges, road crossings? | | | | |
| | | | Yes | No |
| 14. Does the golf course have known presence of any dangerous animals and/or reptiles (for example alligators)? | | | | |
| | | | Yes | No |
| If yes, what controls are in place to protect golfers? | | | | |
| | | | | |
| 15. Does the club have any planned construction or renovation work? | | | | |
| | | | Yes | No |

If yes, a separate application is required.

2. Property

1. The Clubhouse is protected by (check all that apply):

Central Station Smoke/Heat Alarm Central Station Sprinkler Alarm Central Station Burglar Alarm

2. Is there any aluminum wiring in any building that has a value in excess of \$500,000? Yes No

3. Please provide the date of the last full systems update for all Buildings over 25 years old with Total Insured Value (Bldg & PP) of \$1,000,000 or more: *(If there are more buildings valued over \$1M, please provide the information separately)*

Building Name (ex. Clubhouse)	Roof Update	Wiring Update	Plumbing Update	HVAC Update

4. Does the club have back-up generators for use in the event of a power outage? Yes No

If yes, what systems are connected to the back-up generators?

Refrigeration Heating/Cooling Lighting Electrical Computer
 Sprinkler System Support Other – Describe:

5. If smoking is permitted are there designated smoking areas with proper disposal receptacles? N/A Yes No

6. Does the golf course have any bridges? Yes No

If yes, please describe (for example – cart or foot bridges):

Construction of bridge: Age of bridge:

3. Roofing Construction

1. Age of Clubhouse Roof:

2. What type of roof is on the Clubhouse?

Asphalt Shingle Clay Tile/Spanish Tile Copper
 Decorative Steel/Aluminum Slate (or Synthetic Slate) Rolled Rubber Roofing
 Wood Shakes Flat/Built Up Concrete Tile

Other – Describe:

3. For locations in AR, CO, KS, LA, MO, NE, OK, TX, is clubhouse roof UL22180 or 110MPH rated? Yes No

Other buildings?

4. How often is the roof inspected by a qualified contractor?

4. Building Winterization

- | | | | |
|----|--|-----|----|
| 1. | Are any buildings closed down or unoccupied during a period of time where frozen temperatures are possible? | Yes | No |
| 2. | Is the thermostat set at greater than 40 degrees Fahrenheit for any unoccupied building? | Yes | No |
| 3. | Is staff assigned to regularly inspect unoccupied premises/building and document the inspection? | Yes | No |
| 4. | Are temperature monitoring systems installed in unoccupied buildings to monitor and report temperature loss? | Yes | No |
| 5. | Are heating, plumbing and water systems (including sprinkler systems) inspected annually, including formal documentation of winterization process for all buildings? | Yes | No |
| 6. | Are removable structures such as awnings and tents taken down in advance of a winter storm? | Yes | No |
| 7. | Do you promptly initiate snow removal from roofs after snow and ice accumulation to prevent roof structure damage or collapse? | Yes | No |

5. Golf Carts and Golf Course

- | | | | | |
|----|--|--------------------------------|-----------------|----------|
| 1. | Total Number of Riding Golf Carts | Golf Carts are: | Gas | Electric |
| 2. | Where are the golf carts stored? | Separate Cart Storage Building | Under Clubhouse | |
| 3. | If carts are stored in a section of the Clubhouse, is the storage area fully sprinklered? | | Yes | No |
| 4. | If Electric Carts, does the Cart Barn Building have proper ventilation? | | Yes | No |
| 5. | Is the building equipped with Central Station Smoke/Heat Detection? | | Yes | No |
| 6. | Is the building equipped with Central Station Burglar Detection? | | Yes | No |
| 7. | Does the Insured require annually signed Golf Cart Rental Agreement by members? | | Yes | No |
| | If yes, does the agreement require the member to assume all liability related to golf cart use for their guests throughout the year? | | Yes | No |
| 8. | Does club require users of golf carts to have driver's license? | | Yes | No |
| 9. | Does the Club have a lightning warning and notification system in place? | | Yes | No |
| | If Yes, please describe: | | | |

6. Equipment Storage

- | | | | |
|----|---|-----|----|
| 1. | In what building is the grounds equipment stored? | | |
| 2. | Is the building equipped with central station smoke/heat detection? | Yes | No |
| 3. | Is the building equipped with Central Station Burglar Detection? | Yes | No |
| 4. | Does the club have a regular maintenance program in place? | Yes | No |
| 5. | Does the club routinely replace older equipment? | Yes | No |

7. Swimming Pool

1. Number of pools on premises:
2. Are you compliant with The Virginia Graeme Baker Pool and Spa Safety Act? Yes No
3. Is the pool fenced? Yes No Does the fence have a self-latching gate? Yes No
4. Are there any Diving Boards? Yes No Number of Diving Boards:
 Height of Diving Board(s) in meters Depth of Pool at entry from the Diving Board(s):
5. Are lifeguards on duty? Yes No
 If No, is a sign posted "Swim At Your Own Risk"? Yes No
 If No, is there an Emergency Phone within 100' of the pool area? Yes No
 Are lifeguards employees of the club or a third party contractor? Employee 3rd Party
If third party, please provide a copy of the vendor contract.
6. If lifeguards are present, are they certified? Yes No
Please note: acceptable certifications are Lifeguard Pro, YMCA, Teach America to Swim, Red Cross, US Lifesaving Association
 Are certifications confirmed every swim season? Yes No
7. Does pool have visible depth markers? Yes No
 What is the deepest/highest depth of pool?
8. Is the pool locked to deny normal access during non-working hours? Yes No
9. Is there a sliding board? Yes No If yes, height and type of slide:
 If yes, is the slide fully enclosed? Yes No
 Are slide/diving activities separate from normal pool? Yes No
NOTE: If there is a sliding board, pictures must be provided
10. Does the pool complex include a lazy river? Yes No
11. Is there a swim team and/or swim lessons associated with the club? Yes No
 Are Infant/Toddler swim lessons provided? (children age 3 and under) Yes No
12. Is there a dive team associated with the club? Yes No
13. Does the club perform criminal and child abuse background checks on employees associated with the swim/dive team or swim lessons? Yes No
14. Where are the pool chemicals stored?

 Who maintains the pool chemicals? Employees Pool Service
 If Employees maintain pool, are they trained/certified? Yes No

8. Snack Bar or Restaurant

- | | | | | | |
|----|--|------------|--------------------------|-----|----|
| 1. | Is the snack bar or restaurant operated by: | Insured | Concession | | |
| | If Concession, does lessee provide Certificates of Insurance naming club as Add'l Insured? | | | Yes | No |
| 2. | Is the extinguishing system over the cooking facilities UL 300 compliant? | | | Yes | No |
| | Does the system cover the Deep Fat Fryers? | | | Yes | No |
| 3. | Is the system serviced at least semi-annually? | | | Yes | No |
| | If no, how frequent? | | | | |
| 4. | Are hood and duct filters cleaned by insured at least weekly? | | | Yes | No |
| | If no, how frequent? | | | | |
| 5. | Does Club require Employees to have TIPS or similar alcohol awareness training? | | | Yes | No |
| | If yes, indicate employees required to complete training: | Bartenders | Beverage Cart Operators | | |
| | | Wait Staff | Valet Parking Attendants | | |
| | Are written procedures in place regarding the proper serving of alcohol? | | | Yes | No |
| 6. | Does the club have a "Call A Cab" program in place? | | | Yes | No |

9. Dwelling or Habitational

- | | | | | | |
|----|---|-----|----|---|--------|
| 1. | Do you have any Dwellings, Rental Properties, Guest Rooms or Employees' Quarters? | | | Yes | No |
| | If yes, please describe the use of the property: | | | | |
| | If they are employee quarters, advise where they are and how many employees occupy them: | | | | |
| 2. | If the club has any of the above types of habitational property, do they have any of the following: | | | | |
| | Fire Extinguishers? | Yes | No | Hard-Wired Heat/Smoke Detection? | Yes No |
| | Carbon Monoxide Detection? | Yes | No | Central Station Smoke/Heat Alarms? | Yes No |
| | | | | Second means of egress from the property? | Yes No |
| 3. | If there is lodging/guest quarters, what is the total number of rooms available? | | | | |
| 4. | Are rooms available to members and their guests only? | | | Yes | No |

10. Guards

- | | | | | | |
|----|---|--|--|-----------|---------|
| 1. | Does the club have any guards? | | | Yes | No |
| | If yes, are they armed? | | | Yes | No |
| | If Guards are armed, are they Employees or Vendors? | | | Employees | Vendors |

11. Babysitting Services

- | | | |
|--|-----|----|
| 1. Does the club provide any babysitting services? | Yes | No |
| 2. If yes, age of children? | | |
| 3. If yes, what is the length of stay provided? | | |
| 4. If yes, what if the maximum number of children allowed? | | |
| 5. Does the club perform a criminal background check on all caregivers? | Yes | No |
| 6. Does the club perform a child abuse background check on all caregivers? | Yes | No |

12. Day Camp Services/Junior Golf & Tennis

- | | | |
|--|-----|----|
| Does the club offer Day Camp/Junior Golf & Tennis Programs? | Yes | No |
| If yes, separate Day Camp/Sports Program Questionnaire must be completed | | |

Signature

Date