



Donat Insurance Services, LLC

No Event Too Big Or Small, We Insure Them All

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Escape Room General Liability Application

7081 Hwy 58, New Lisbon, WI 53950 * Office: (608) 847-2604 * Cell: (608) 343-0273 * Fax: (608) 847-7733

Applicant Information			
Insured Name			
Mailing Address			
Street			
	City	State	Zip
Event Name/Address			
Street			
	City	State	Zip
Website Address			
Applicant is <input type="radio"/> Individual <input type="radio"/> Corporation <input type="radio"/> Partnership <input type="radio"/> Joint Venture			
	Other		
Contact	Phone	Fax	
E-mail Address			
Event Information			
Event Description (attach any promotional material)			
Effective Date		End Date	
Estimated Attendance		Last Year's Attendance	
Maximum Number of Players			
Estimated Gross Receipts			
Price of Admission			
Attendee Age Demographic			
Minimum Age		Special Concerns for Children	
Monitoring Room Square Footage:			
Crowd Control/Security		<input type="radio"/> YES	<input type="radio"/> NO
If using hired security, are certificates of insurance obtained? <input type="radio"/> Yes <input type="radio"/> No			
Are first aid facilities provided? <input type="radio"/> Yes <input type="radio"/> No Describe			
Employee Type and Numbers			
Regular		Leased	Volunteer
Is Workers Compensation Coverage in Force? <input type="radio"/> Yes <input type="radio"/> No Estimated Payroll			

Event information (Cont'd.)

Are food or beverages sold on the premises? Yes No | Outside vendor? Yes No

Food types available:

Cooking methods if cooked on site:

Alcoholic beverages served:

Details:	Yes	No	Special Effects and Devices
Live Actor(s) in Room	<input type="radio"/>	<input type="radio"/>	
Are Escape Rooms Locked	<input type="radio"/>	<input type="radio"/>	
<i>If Yes, how do patrons get out in emergency:</i>			
Fire Extinguishers on Site	<input type="radio"/>	<input type="radio"/>	
<i>Fire Extinguishers must have Valid Inspection Tag</i>			
Smoke Detectors	<input type="radio"/>	<input type="radio"/>	
Sprinkler System	<input type="radio"/>	<input type="radio"/>	
Completed Fire Dept. Inspection	<input type="radio"/>	<input type="radio"/>	
Certificate of Occupancy	<input type="radio"/>	<input type="radio"/>	
Number of Rooms			
Room Dimensions			
Length of Game	45 Min	60 Min	

Applicant history: Describe applicant's experience with Escape Rooms including years, numbers, dates:

Premium and loss record for the last five years:

Policy Period	Carrier	Premium	Loss Amount	Non-Renewal Or Cancel

Describe details of losses/incidents for the past five years:

