



# Family Resort Program Supplemental Application

## APPLICANT INFORMATION

NAMED INSURED

SOCIAL SECURITY #

FEIN

WEB ADDRESS

## UNDERWRITING INFORMATION

1. Brochure available? ..... ☐ Yes ☐ No  
(If so, please attach a copy.)
2. Total annual sales: ..... \$ \_\_\_\_\_
3. Operated by: ☐ Owner ☐ Manager
  - a. Owner live on premises? ..... ☐ Yes ☐ No
  - b. Length of ownership at this location ..... \_\_\_\_\_
4. Seasonal? ..... ☐ Yes ☐ No
  - a. If so, months closed: \_\_\_\_\_
5. Swimming pool/beach? ..... ☐ Yes ☐ No  
If yes,
  - a. Fence? ..... ☐ Yes ☐ No
  - b. Diving board? ..... ☐ Yes ☐ No
  - c. Slide? ..... ☐ Yes ☐ No
  - d. Lifeguard? ..... ☐ Yes ☐ No
6. Docks? ..... ☐ Yes ☐ No  
If yes,
  - a. Construction: \_\_\_\_\_
  - b. Swimming allowed off dock? ..... ☐ Yes ☐ No  
If so, is the area roped off? ..... ☐ Yes ☐ No
  - c. Age of dock: \_\_\_\_\_
  - d. Roof on dock: ..... ☐ Yes ☐ No
  - e. Any tanks or permanent structures attached to the dock? ..... ☐ Yes ☐ No  
If yes, describe and give values: \_\_\_\_\_  
\_\_\_\_\_
7. Boats or motors rented? ..... ☐ Yes ☐ No  
If yes,
  - a. Number of rental boats over 26 ft.: \_\_\_\_\_
  - b. Number of rental motors over 50 h.p.: \_\_\_\_\_  
Total of sales generated from a. and b. \$ \_\_\_\_\_
  - c. Rental agreement? ..... ☐ Yes ☐ No
  - d. Boats allowed to operate at night? ..... ☐ Yes ☐ No
  - e. Ski boats rented? ..... ☐ Yes ☐ No
  - f. Water skis rented? ..... ☐ Yes ☐ No
  - g. Water skis pulled ..... ☐ Yes ☐ No
  - h. Jet skis rented? ..... ☐ Yes ☐ No
  - i. Parasailing? ..... ☐ Yes ☐ No

- j. Deck boats rented? ..... ☐ Yes ☐ No
- k. Pontoons rented? ..... ☐ Yes ☐ No
- l. Charter or launches? ..... ☐ Yes ☐ No
- m. Boat storage or moorage? ..... ☐ Yes ☐ No  
If yes, annual sales: ..... \$ \_\_\_\_\_
- n. Do owners have a personally owned boat over 26 ft. or 50 h.p.? ..... ☐ Yes ☐ No
- o. Any snowmobiles owned? ..... ☐ Yes ☐ No
- p. Any jet ski or waverunner owned personally? ..... ☐ Yes ☐ No  
If yes, what CCs or h.p.? \_\_\_\_\_
- q. Any ATVs owned? ..... ☐ Yes ☐ No  
If yes, for what purpose? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- r. Any other water devices? ..... ☐ Yes ☐ No  
If yes, explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### 8. Does the resort offer any of the following?

- a. Bike rental ..... ☐ Yes ☐ No  
If yes, annual sales ..... \$ \_\_\_\_\_
- b. Golf course ..... ☐ Yes ☐ No  
If yes, annual sales ..... \$ \_\_\_\_\_
- c. Ice fishing house rental ..... ☐ Yes ☐ No  
If yes, annual sales ..... \$ \_\_\_\_\_
- d. Is transportation provided on and off the ice? ..... ☐ Yes ☐ No
- e. Guided canoe trip or float trips ..... ☐ Yes ☐ No  
If yes, annual sales ..... \$ \_\_\_\_\_
- f. Trampolines ..... ☐ Yes ☐ No
- g. Snowmobile rental or snowmobile trail grooming ..... ☐ Yes ☐ No
- h. Downhill ski rental ..... ☐ Yes ☐ No
- i. Ski trails owned or maintained ..... ☐ Yes ☐ No
- j. Scuba diving gear rental ..... ☐ Yes ☐ No

- k. Playground equipment ..... ☐ Yes ☐ No  
 l. Horses provided ..... ☐ Yes ☐ No  
 m. Hayrides ..... ☐ Yes ☐ No  
 n. Other? \_\_\_\_\_
9. Guided service offered ..... ☐ Yes ☐ No  
 If yes, a. Annual sales ..... \$ \_\_\_\_\_  
 b. Fishing contests held or tournaments  
 ..... ☐ Yes ☐ No  
 c. Number of contests ..... \_\_\_\_\_  
 d. Length of contest ..... \_\_\_\_\_
10. Groceries sold? ..... ☐ Yes ☐ No  
 If yes, annual sales ..... \$ \_\_\_\_\_
11. Gasoline sold? ..... ☐ Yes ☐ No  
 If yes, annual gallons ..... \$ \_\_\_\_\_
12. Campground? ..... ☐ Yes ☐ No  
 If yes, annual sales ..... \$ \_\_\_\_\_
13. LPG tanks filled? ..... ☐ Yes ☐ No  
 If yes, annual gallons ..... \$ \_\_\_\_\_

14. Heating in units (check all that apply)  
 ..... Electric ☐  
 ..... Natural gas ☐  
 ..... LPG ☐  
 ..... Fireplace ☐  
 ..... Wood stove ☐
15. Heating in lodge (check all that apply)  
 ..... Electric ☐  
 ..... Natural gas ☐  
 ..... LPG ☐  
 ..... Fireplace ☐  
 ..... Wood stove ☐
16. Is there a shuttle service provided? ..... ☐ Yes ☐ No
17. Restaurant or tavern? ..... ☐ Yes ☐ No  
 If yes, a. annual food sales: ..... \$ \_\_\_\_\_  
 b. Annual alcohol sales ..... \$ \_\_\_\_\_  
 Grill or fryer? ..... ☐ Yes ☐ No  
 If yes, wet UL suppression? ..... \_\_\_\_\_  
 Date of last service: ..... \_\_\_\_\_

**N.J. Law P.L 1995, c. 132:** Any person who includes any false or misleading information on the application for an insurance policy is subject to criminal and civil penalties. The information in this application is correct to the best of my knowledge and belief.

**For PA Submissions:**

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. The information in this application is correct to the best of my knowledge and belief.

I certify that the information in or attached to this questionnaire is true, complete and correct based on business records and my personal knowledge. I grant United Fire Group authorization to order a credit report on my business and/or me.

Owner or Officer's Name

Agent's Name

Title

Agent's Signature

Date

Owner or Officer's Signature

Date

Expiring policy number, if applicable