Destination Resorts & Hotels WATERCRAFT / MARINA



Name of Insured/Area:			
Address:			
Date(s) of Event:			
Location(s) of operation:			
Receipts generated:			
Is this operation concessioned?		Yes	□No
If yes, attached certificate of insurance for the concessionaire			
Is area named as Additional Insured?		Yes	□No
Are releases required for:	Rentals	☐Boat Stora	age
(attach copies of releases)			
Does the operation rent boats and equipment?		Yes	∐No
Number and type of boats rented (size, HP)			
Does operation store boats for other owners: Incl. in season,	wet storage,	_	
clips and out of season storage, dry (stack or trailers):		Yes	∐No
Describe:			
Number of rental slips available:			
Total annual receipts for slip rentals			
Does operation provide mechanic for repair and maintenance	work on boa		□N1-
D :: 1 1 1 1 1 1 1 1 1		Yes	∐No
Does operation provide and sell fuel (gasoline & oil)?		∐Yes	∐No
Gallons of gas sold per year:		Yes	Пио
Are fire safety procedures followed at the gas dock?		Yes	No
What age requirements are there for boat rentals?			□NI-
Are safety and floatation devices provided with each rental:		Yes	No
Are life vests mandatory?		Yes	No
Are maintenance records kept for each boat?		Yes	<u></u> No
Are employee training records kept?		Yes	No
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Are the facilities inspected by federal or state authorities (i.e. (State Boating Authorities):	Coast Guard,	, State Fire M □Yes	ıarsnaıı, ∏No
List:		☐ 1 62	
Do you provide excursion boats operated by employees?		Yes	No
If operation is on a lake or river and swimming is allowed, is there a life-guard on duty at all times?			
		Yes	□No