

Rental House and Event Production/Service Company

Supplemental Questionnaire

1. Insured: _____

2. Industry Organization Membership:

a. PERG/Plasa Member: ☐ Yes ☐ No

b. ESA (Event Safety Alliance) Member: ☐ Yes ☐ No

c. Other: _____

3. Type of Equipment rented _____
or used during an event.

4. Receipts for the past 3years:

Year	Sales Receipts	Rental Receipts
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

5. Estimated Annual Receipts for the policy term:

Sales Receipts	\$ _____
Rental Receipts	\$ _____

6. Attach a copy of your:

- ☐ Rental Agreement
- ☐ Service Agreement

7. Rental Procedures and Controls (check all that apply):

Inventory and Rental Control

All equipment is registered in an automated inventory control system.

☐ Yes ☐ No

All equipment is locked up when on premises:

☐ Yes ☐ No

Equipment is rented with the named insured's operator:

☐ Yes ☐ No

Equipment rented to a third party.

☐ Yes ☐ No

If yes:

a. A rental contract/agreement is utilized.
(attach)

☐ Yes ☐ No

b. Evidence of property and liability insurance is required from the rentee:

☐ Yes ☐ No

c. Do you require the rentee to add you as an additional insured & loss payee:

☐ Yes ☐ No

Do you perform a credit check on the rentee prior to releasing the equipment:

☐ Yes ☐ No

Do you perform background check on the rentee prior to releasing the equipment

☐ Yes ☐ No

Transportation of Equipment

Do you transport your own equipment

☐ Yes ☐ No

A contract carrier is utilized

☐ Yes ☐ No

A common carrier is utilized

☐ Yes ☐ No

8. Website address:

9. Premises Information

Building Construction _____

Age of building _____

Roof type: _____ Last updated: _____.

Plumbing: _____ Last Updated: _____

Heating: _____ Last Updated: _____

Electrical: _____ Last Updated: _____

Private Fire Protection: ☐ Yes ☐ No

Private Burglar Protection ☐ Yes ☐ No

Public Fire Protection: ☐ Yes ☐ No

Any history of flooding or sewer backup at the location?

☐ Yes ☐ No Details _____

10. Limits of Liability:

Owned Equipment: \$ _____

Equipment Rented from Others: \$ _____

Office Equipment: \$ _____

Business Income, Extra Expense and
Expediting Expense: \$ _____

Electronic Data Processing:

Hardware: \$ _____

Software: \$ _____

Extra Expense: \$ _____

Money & Currency: \$ _____