

P.O. Box 650 • 57 Parker Rd. • Barre, VT 05641 • 800-548-4301 • www.neee.com

VALET PARKING SUPPLEMENTAL APPLICATION

Please answer all questions. Submit this questionnaire with a completed ACORD application and prior carrier loss runs.

APPLICANT INFORMATION									
Named Insured									
Address									
Website									
	SCHEDU	JLE OF OPERATIONS							
1.	. What is the lot location address if different than above?								
2.	Hours and days of operation?								
3.	Do you operate any of the following: 🛛 🗌 Stand-al	lone valet operation	Valet for someone e	lse's business					
	If you valet for someone else's business complete the following questions.								
	a. Name of business for which you valet park?								
	b. What type of establishment is this?								
	SPECIAL EVENTS N/A								
1.	. If your business provides parking for special events, provide details:								
2.	List the addresses of the location(s) where special events are operated (if known):								
3.	Is additional staff hired for special events?		YES	NO					
4.	Are MVRs of temporary staff checked?		N/A	YES NO					
5.	If services are provided for special events, select type	es of establishments fo	r which valet parking is p	provided:					
	Airports Casinos	Corporate Events	Condominiums						
	Country Clubs Fair Grounds	Festivals	Grand Openings						
	Hospitals Hotels & Resorts	Night Clubs	Office Buildings						
	Private Clubs Private Parties	Red Carpet Events	Restaurants						
	Shopping Malls Ski Resorts	Special Events	Sporting Events						
	Theme Parks Weddings								
	Other (description):								
	PHYSICAL DAMAGE TO CUSTOMERS' AUTOS	6 (OPTIONAL PROPERT	Y COVERAGE)	□ N/A					

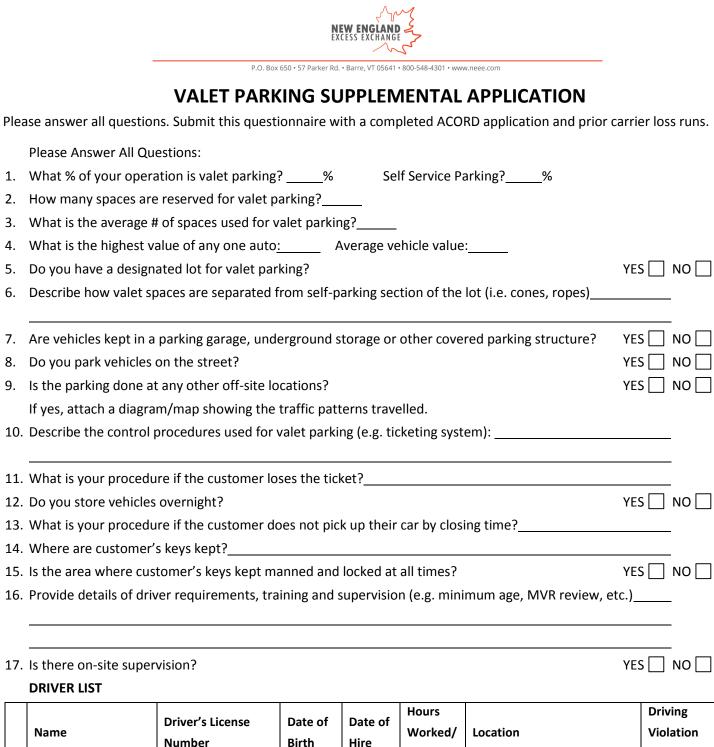
Direct Primary Coverage for Loss or Damage to Customers' Autos

Legal Liability Coverage for Loss or Damage to Customers' Autos

Premises:

	Address	Limit (per event)	Deductible (per event)
Premises 1			
Premises 2			
Premises 3			

GENERAL INFORMATION



	Name	Driver's License Number	Date of Birth	Date of Hire	Worked/ Week	Location	Violation (y/n)*
1							
2							
3							
4							
5							

*Driving Violation: Any Type A Violation OR more than one moving violation within the past 3 years If yes, these drivers must be listed on form S2124 Exclusion – Named Driver Endorsement

This application does not bind the applicant nor the company to complete the insurance, but it is agreed that the information contained herein shall be the basis of the contract should a policy be issued.



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APPLICABLE IN THE STATE OF NEW YORK

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 shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each violation.

FRAUD WARNING

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.

NOTICE OF INSURANCE INFORMATION PRACTICES

PERSONAL INFORMATION ABOUT YOU, INCLUDING INFORMATION FROM A CREDIT REPORT, MAY BE COLLECTED FROM PERSONS OTHER THAN YOU. SUCH INFORMATION AS WELL AS OTHER PERSONAL AND PRIVILEGED INFORMATION COLLECTED BY US OR OUR AGENTS MAY IN CERTAIN CIRCUMSTANCES BE DISCLOSED TO THIRD PARTIES. YOU HAVE THE RIGHT TO REVIEW YOUR PERSONAL INFORMATION IN OUR FILES AND CAN REQUEST CORRECTION OF ANY INACCURACIES. A MORE DETAILED DESCRIPTION OF YOUR RIGHTS AND OUR PRACTICES REGARDING SUCH INFORMATION IS AVAILABLE UPON REQUEST. CONTACT YOUR AGENT OR BROKER FOR INSTRUCTION ON HOW TO SUBMIT A REQUEST TO US.

Applicant Name (Print)

Producer Name

Applicant Signature & Date

Producer Address