



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

Swimming Pools, Beaches, Water Exposures Supplemental

(To be used in conjunction with Acord applications) All questions must be answered in full.

Supplemental must be signed and dated by the applicant.

Applicant Name: _____

Applicant Website: _____

What year did the business start: _____. If a new venture describe prior experience: _____

Location #	Address	Operations (pools, beaches, etc)

Complete this section for all water exposure types (indicate NA if section does not apply)

Type of Facility	Number of Units	Indoor or Outdoor	Depth	
			Minimum	Maximum
Swim Club (club members and guests)				
Commercially Operated Pool (open to public for a fee)				
Pools operated/associated with other business operations (apartments, condos, H/O assoc., hotels, campgrounds, etc)				
Pool provided with a rental dwelling				
Bathing Beaches - Commercially operated (open to public for a fee)				
Bathing Beaches operated/associated with other business operations (apartments, condos, H/O assoc., hotels, campgrounds, etc)				
Lakes or Reservoirs				
Other Natural Bodies of Water (describe)				
Whirlpools, Hot Tubs, Spas, Jacuzzi or similar equipment				
Saunas, and similar				

- What is the operation season? From _____ To _____
- What are the hours of operation? _____
- Who is responsible for maintenance? Insured Independent Contractor
- If independent contractors are used is there a contract in place which requires that GL limits are at least equal to or greater than the limits being requested and that the applicant be named as an Additional Insured? Yes No
- If you operate a Swim or Beach Club provide the number of members: _____
- Other exposures, including but not limited to: Restaurant Bar or Tavern Concerts Event Venue Other
- If yes to any provide complete details: _____
- Is alcohol served or allowed (BYOB) on premise? Yes No
- Is there a pool house or club house? Yes No
 - If yes, Hours of Operations? _____ Maximum Capacity: _____ Area(s/f): _____
 - Provide details of use: _____
- Do you offer instruction of any of the following: Swimming Diving Other or NA
- Describe all: _____
- Are there any sponsored contests/meets, swim teams, diving teams or sporting events? Yes No

If yes, describe: _____

Gross Receipts - complete all sections if not applicable enter NA

Year	Pools &/or Beaches	*Food & Beverages	*Alcohol	*Clothes &/or Sporting Goods	*Rentals	Other *
Next 12 months						
Prior Year						
Prior Year						
*Provide complete details: _____						

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Complete for Pools, Spa, Whirlpools, Hot Tubs, Jacuzzis, Saunas and similar equipment check here if none

1. Does the applicant's facility meet the Federal Swimming Pool and Spa Drain Cover Standard as outlined in the Virginia Graeme Baker Pool and Spa Safety Act? Yes No
2. Is the pool facility entirely enclosed by a fence at least 4ft in height? Yes No
3. Do all gates have self-closing and self-latching mechanisms to limit pool access? Yes No
4. Is fence/facility kept locked while pools are not in use? Yes No
5. Are rules and regulations posted? Yes No
6. Are "No Trespassing", "Swim At Your Own Risk" and warning signs posted and visible regarding use as required by law, regulation, and/or ordinance? Yes No
7. Is lifesaving equipment available and maintained in working order? Yes No
8. Is first aid equipment available and maintained in working order? Yes No
9. Is a properly maintained communication device available in pool areas for use in case of emergency as required by law, regulation, and/or ordinance? Yes No
10. Are depth markers clearly posted and visible both inside and outside all pools? Yes No
11. For indoor pools is there restricted access to the pool area?
If yes, describe: _____ Yes No
12. Are lifeguards on duty during pool hours? Yes No
 - a. If yes, are lifeguards Red Cross certified? Yes No
 - b. Number of lifeguards on duty during pool hours? _____ or NA
13. Are lifeguards provided by a 3rd party lifeguard service or other independent contractor? Yes No
If yes, is there a contract in place which requires that GL limits are at least equal to or greater than the limits being requested and that the applicant be named as an Additional Insured? Yes No
14. Are there diving boards or diving platforms? Yes No
 - a. If yes, how many? _____ or NA
 - b. Height of all diving boards/platforms: _____ or NA
 - c. Are there dedicated diving areas? Yes No
 - d. Is the depth of diving areas at least 9 feet? Yes No
 - e. Describe all diving restrictions: _____
15. Are there water slides? Yes No
 - a. Are slides enclosed? NA Yes No
 - b. Height of all slides: _____ or NA
 - c. How deep is the water where slides are located? _____ or NA
16. Are swimmers required to pass a swimming test in order to enter deep water?
Describe how monitored: _____ Yes No
17. Are non-slip surfaces in pool areas, hot tubs, saunas, steam rooms etc? Yes No
18. Are non-slip surfaces in locker rooms/shower areas? Yes No
19. If pool or other equipment is provided as part of apartments, condos, townhouses, hotels/motels, campground etc are "No Trespassing" and "Swim At Your Own Risk" signs visibly posted? Yes No

Complete for Beaches and other natural bodies of water check here if none

1. Are rules and regulations posted? Yes No
2. Are "No Trespassing", "Swim At Your Own Risk" and warning signs posted and visible regarding use as required by law, regulation, and/or ordinance? Yes No
3. Is lifesaving equipment available and maintained in working order? Yes No
4. Is first aid equipment available and maintained in working order? Yes No
5. Is a properly maintained communication device available in beach areas for use in case of emergency as required by law, regulation, and/or ordinance? Yes No
6. Are there designated swimming areas?
Describe all: _____ Yes No
7. Are ropes in place to differentiate deep areas and shallow areas? Yes No
8. Are these areas clearly identified?
Describe: _____ Yes No
 - a. Are there diving boards or diving platforms?
If yes, how many? _____ or NA
 - b. Height of all diving boards/platforms: _____ or NA
 - c. Are there dedicated diving areas? Yes No
 - d. Is the depth of diving areas at least 9 feet? Yes No

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e. Describe all diving restrictions: _____

9. Are there water slides? Yes No
a. Are slides enclosed? NA Yes No
b. Height of all slides: _____ or NA
c. How deep is the water where slides are located? _____ or NA
10. Are lifeguards on duty during beach hours? Yes No
a. If yes, are lifeguards Red Cross certified? Yes No
b. Number of lifeguards on duty during beach hours? _____ or NA
11. Are lifeguards provided by a 3rd party lifeguard service or other independent contractor? Yes No
If yes, is there a contract in place which requires that GL limits are at least equal to or greater than the limits being requested and that the applicant be named as an Additional Insured? Yes No

Complete for Lakes, Reservoirs and other natural bodies of water (existence exposures) check here if none

1. Provide complete description(s) of all lakes, reservoirs, and other natural bodies of water: _____

2. Are "No Trespassing", "No Swimming" and/or other warning signs visibly posted at regular intervals Yes No
3. Is premises secured limiting unauthorized access? Yes No
Explain: _____

Use this space for additional information:

Applicants Signature: _____ Date: _____

Agents Signature: _____ Date: _____