

Markel event insurance quote sheet



Thank you for your interest in Markel Event Insurance. Please provide full and complete answers to all questions. Please be sure to read the policy warranties and requirements.

PRODUCER INFORMATION:

General agent code: _____ Producer code: _____ Desired effective date: _____

Name: _____

Address: _____

Phone: _____ Contact email: _____

SECTION 1. POLICYHOLDER INFORMATION

Named insured: _____

Phone number: _____ Email: _____

Mailing address: _____

SECTION 2. EVENT INFORMATION

Event date: _____ Event state/country: _____

Number of attendees: 1-50 51-200 201-500 501-1,000 1,001+

Event type (please select one):

Wedding Private party (please describe below) Business/organization event (please describe below)

Honoree full name: _____

Honoree full name: _____



SECTION 3. ELIGIBILITY QUESTIONS

- 1. Will the event involve animals? (i.e. petting zoos, animal rides, or any other animal related activities) Yes No
- 2. Will the event involve firearms or other weapons? Yes No
- 3. Will the event involve amusement devices, such as a bounce house, blowup slides, moon walk, petting zoo, dunk tank, mechanical rides, trampolines, and arcade games? Yes No
- 4. If this is a business/organizational event, will the event take place across multiple days? Yes No
- 5. If this is a business/organizational event, will the event involve sport, athletic competitions, or water activities? Yes No

SECTION 4. VENUE #1 INFORMATION - CEREMONY, IF WEDDING EVENT

Venue name: _____

Venue mailing address: _____

Venue type: Hotel Winery Church Community center Banquet hall Other

Entities other than above venue to list on Certificate of Insurance:

SECTION 5. VENUE #2 INFORMATION - RECEPTION IF WEDDING EVENT

Venue name: _____

Venue mailing address: _____

Venue type: Hotel Winery Church Community center Banquet hall Other

Entities other than above venue to list on Certificate of Insurance:



SECTION 6. VENUE #3 INFORMATION - REHEARSAL IF WEDDING EVENT

Venue name: _____

Venue mailing address: _____

Venue type: Hotel Winery Church Community center Banquet hall Other

Entities other than above venue to list on Certificate of Insurance:

SECTION 7. COVERAGES AND LIMITS

Event liability coverage

Limits are displayed in "per occurrence/aggregate" format

This coverage helps protect the policyholder against damages to property or injuries caused at the event.

No coverage \$500,000/\$500,000 \$1,000,000/\$1,000,000 \$1,000,000/\$2,000,000

\$2,000,000/\$2,000,000 \$3,000,000/\$3,000,000 \$4,000,000/\$4,000,000 \$5,000,000/\$5,000,000

Host liquor liability: Yes No

Waiver of subrogation: Yes No

Medical payments

No coverage \$1,000 \$2,500 \$5,000 \$10,000

Event cancellation coverage

This coverage helps protect the policyholder's non-refundable deposits for things like: vendor bankruptcy, military deployment, unforeseen extreme weather circumstances, death or illness of family members, and more.

No coverage \$7,500 \$15,000 \$25,000 \$35,000 \$50,000 \$75,000 \$100,000

\$125,000 \$150,000 \$175,000

Are these coverages required by the venue? Yes No

SECTION 8. EVENT PLANNER INFORMATION (OPTIONAL)

Coordinator name: _____

Coordinator address: _____

