



Maritime Program Group

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Other Locations
Hobe Sound, FL
Darien, CT
Freeport, ME

Concord, NC
Boston, MA
Tarrytown, NY

SWIMMING POOL SUPPLEMENTAL APPLICATION

APPLICANT / POOL LOCATION INFORMATION

Name:
Address:
City: State: Zip:
Effective Date:
Expiration Date:

PRODUCER INFORMATION

Name:
Address:
City: State: Zip:

GENERAL INFORMATION

- 1. Does the pool have depth markers?
2. Is there a diving board or diving platform?
3. Is area fenced with height of at least 4 feet?
4. Does the gate have a self-closing latch?
5. Is the gate locked and secured when closed?
6. Is there video surveillance in the pool area?
7. Is there a lifeguard on duty?
8. Is this open to the public?
9. Do members sign a waiver?
10. Do guests sign a waiver?
11. PH and Chlorine levels are monitored
12. Safety equipment is clearly marked, accessible, and maintained

RULES

Does the insured post their rules in the pool area with proper visibility and if so, do they follow the below guidelines? Yes (continue below) No

- Lists hours operating From: To: Yes No
Running and/or horseplay not allowed Yes No
Adults must accompany minors under the age of 12 Yes No
Electronic appliances are restricted within 1 foot of the pool edges and must meet NFPA codes Yes No
Alcoholic beverages and glass containers are prohibited within 20 feet of pool area Yes No
Pool restricted to members and invited guests only (not open to public) Yes No
Members (and guest) swim at own risk Yes No
If applicable: no lifeguard on duty Yes N/A

You understand and agree this application is a request for a quote based on the information provided herein. You understand and agree the actual coverage, terms and conditions offered by MPG may be different than your request contained herein. The actual terms and conditions for coverage provided are represented by the policies issued and supersede any request or representations made prior to issuance.

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime.

The applicant represents that the above statements and facts are true and that no material facts have been suppressed or misstated.

Applicant's Signature

Date

Print Name

Title