



Outdoor Underwriters, Inc.
140 Stoneridge Drive, Suite 230
Columbia, SC 29210
803-451-5826 Phone 866-961-4101 Toll Free 803-451-5695 Fax

GUIDES AND OUTFITTER LIABILITY APPLICATION

Applicant Name _____
 Fed. ID/SSN _____ Contact Name _____
 Mailing Address _____
 City _____ State _____ Zip _____
 Telephone _____ Mobile _____ Fax _____
 E-Mail Address _____ Website _____

Desired Effective Date ____ / ____ / ____

COVERAGE – LIMITS DESIRED: *(Higher Limits Available)*

\$300,000 / \$600,000
 \$500,000 / \$1,000,000
 \$1,000,000 / \$2,000,000

Which best describes the organization: Fishing Guide Hunting Guide Other _____

Description of organization: Sole Proprietorship Partnership Corporation Other _____

Description of Operations (Including type of game hunted)

Years in operation: _____

Prior experience, if in business less than 5 years:

Is applicant a member of a Professional Guides Association? Yes No

What fire control water sources are available?

Fire Hydrant Pool Pond/Lake Water Tank Other _____

Activities Conducted	# of Guides	# of Units	# of Days Used	Revenue
ATV - guided				
ATV – unguided				
Fishing – guided				
Fishing – unguided				
Hay, Sleigh or Wagon Rides				
Horseback Riding				
Hunting				
Lodging – Cabin Rentals <i>(complete section below)</i>				
Outfitting				
Pools/Swimming Area				
Retail Store <i>(complete section below)</i>				
Shooting Range – Rifle or Pistol				
Watercraft <i>(complete section below)</i>				
Youth Camps or Programs				
Other, please describe				

Lodging	Number
Guest Lodges	
Bedrooms	

Retail Operations				
General Store	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Liquor Store	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Gun Sales	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Fishing Equipment Sales	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Fishing Equipment Rental	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Non-Motorized Watercraft

Boat Type	Number Used
Canoes/Kayaks	
Row Boats/Paddle Boats	

Motorized Watercraft

Year	Make & Model	Length	HP	# Passengers

Guide Information

Name	Age	Yrs. Exp.	First Aid Qualifications	Full Time	Part Time

What type of license & license number do guides have? (if applicable)

Is there cooking on the premises? Yes No
Do you require your guests to sign a liability waiver? Yes No
Do you have a brochure or web page? Yes No
Has any carrier declined to write or renew? Yes No
If yes, please give full details:

Previous Insurance

Year	Company	Policy Number	Premium

Describe Any Losses

Date	Description of Incident	Amount Paid/Reserved
		\$
		\$
		\$
		\$

Additional Insureds

Name	Complete Address	Interest

Required Attachments

- All brochures describing any and all services; or website address above.*
- The liability waiver/hold harmless agreement you require your guests to sign, if applicable.*
- Three years hard copy Loss Runs, if unavailable, provide a no loss letter signed by insured.*

Date _____

Applicant Signature _____