



INSURANCE AGENCY, INC.
 PRIMARY / EXCESS AND SURPLUS LINES BROKERS
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Outfitters and Guides Program Supplemental Application

(Complete in addition to ACORD General Liability Application)

Name of Applicant: _____

1. Description of operations: _____

2. Type of license (if applicable): _____

3. Applicant's prior experience: _____

4. Activities of applicant:

A. Guides	Number of Guides		Number of Guides
Hunting	_____	Cross-country skiing	_____
Fishing	_____	Backpacking	_____
Combination Hunting & Fishing	_____	Hiking	_____

B. Pack animals/saddle animals	Number of Animals
Pack animals	_____
Saddle animals	_____

C. **Outfitters**
 Total annual gross receipts: _____

D. **Guest lodging**
 Description of lodging provided: _____
 Total number of units: _____
 Swimming pool provided? Yes No

E. **Boats**
 Number of boats: _____
 Length of boats and horsepower: _____
 Does applicant provide each boat passenger with a personal flotation device? Yes No

5. Is applicant involved with any of the following activities?

- A. White water exposures (Class III and above)? Yes No
- B. Canoe/kayak watercraft exposures?..... Yes No
- C. Downhill skiing? Yes No
- D. Rock climbing or rappelling? Yes No
- E. Tree stands provided by applicant? Yes No
- F. Horse rental, training or riding instructions? Yes No
- G. Sleigh, buggy or hay rides? Yes No
- H. Applicant providing snowmobiles or ATVs?..... Yes No
- I. Aircraft exposures? Yes No
- J. Applicant providing firearms or ammunition?..... Yes No
- K. Inner tube rentals? Yes No
- L. Horse trail rides? Yes No

Comments: _____

Applicant's Signature: _____ Date: _____