



1712 Magnavox Way P.O. Box 2338
 Fort Wayne, IN 46801-2338
 (800) 348-1839 Fax (260) 459-5118
 www.kandkinsurance.com
 California License# 0334819

**MOTORCYCLE
 FACILITY
 APPLICATION**
 FOR RACING LIABILITY COVERAGE

A. INSURED INFORMATION

Legal name: _____
 Doing business as: _____
 Mailing Address: _____
 City: _____ State: _____ Zip: _____
 Phone:(_____) _____ Fax:(_____) _____
 Contact Person: _____
 UPS Mailing Address: _____
 City: _____ State: _____ Zip: _____
 1. Insured is: Corporation Partnership Joint Venture Other (explain) _____
 2. In what state is the organization headquartered/chartered? _____
 3. Policy period being requested: From _____ To _____

B. ADDITIONAL INSUREDS

Name: _____ Business relationship: _____

C. ATTENDANCE

Estimated total annual attendance: _____

D. TYPE OF EVENTS SCHEDULED

Motocross Flat Track Scrambles Hare Scrambles Hare & Hound Enduros Road Course
 1. Type of Surface _____
 2. AMA Sanctioned? Yes No
 3. If not AMA sanctioned, please forward a copy of the track rulebook.

E. UNDERWRITING INFORMATION:

1. Does facility have a perimeter fence? Yes No
 What type of fence? _____
 What is the height of the fence? _____
 Is the fence continuous from the ground up? Yes No
 Is there a locking gate? Yes No
 Is the gate locked when facility is not in use? Yes No
 Are any public roads in use within the confines of the course? Yes No
 If yes, please explain _____
 2. Is there a crowd control fence in place between the track surface and all designated viewing areas? Yes No
 Is the fence continuous from the ground up? Yes No
 What type of fence? _____
 What is the height of the fence? _____
 Type of posts used _____
 Distance between posts _____
 If no, please explain _____
 3. Are positive barriers in place to protect spectator viewing areas? Yes No
 Type of barriers _____
 What is the distance between positive barrier and crowd control fence? _____
 4. Is there a minimum distance of 30 feet between the course and crowd control fencing at all jump areas at all times? Yes No

5. Is there a minimum distance of 20 feet between the course and crowd control fencing at all other viewing areas? Yes No
6. Are there outside course markers in place to keep the course from growing towards the crowd control fence? Yes No
7. Are spectators permitted in the infield of the course? Yes No
If yes, how do spectators access the infield? _____
8. Are the pits located in the infield of the course? Yes No
9. If spectator and/or participants are allowed in infield, is there a crowd control fence in place between the track surface and the designated viewing areas? Yes No
10. Is the fence continuous from the ground up? Yes No
What type of fence? _____
What is the height of the fence? _____
Type of posts used _____
Distance between posts _____
If no, please explain. _____
11. Are flaggers present for all events and practices? Yes No
How many? _____
Are all flaggers trained and updated on track procedures? Yes No
What means of communication do the flaggers use in case of an emergency? _____
12. Is a state-certified ambulance on site for all events and practices? Yes No
 Sub-contracted Track Owned
13. Are licensed ambulance attendants provided? Yes No
How many? _____
Is the on-site medical staff able to access and retrieve an injured person at any part of the facility via reliable vehicles? Yes No
Explain _____
14. Is fire equipment provided? Yes No
 Fire Department Track Owned Equipment
15. Are riders required to wear the appropriate safety riding equipment at all times? Yes No
16. Are controls in place that establish clear directional flow for riders entering and exiting the track? Yes No
17. Are 4-wheelers allowed to participate? Yes No
If yes, are they allowed on the track with motorcycles? Yes No
18. Is facility open for open practice? Yes No
What is maximum number of riders allowed on track during open practice events? _____
Are practice sessions timed, so that riders are required to take breaks in order to avoid fatigue? Yes No
Are medical staff and fire and safety equipment on-site during open practice events? Yes No
Are rules in place that separate rider track time based on age, experience level and size of motorcycle? Yes No
If yes, please explain _____
Do you allow open riding on the facility that is not supervised? Yes No
If yes, please explain _____
19. Is there a documented track maintenance program in place? Yes No
How often is the track groomed? _____
How often is the track inspected? _____
20. Are drivers under the age of 16 permitted? Yes No
If yes, in what class? _____
What is minimum age? _____
21. What is the minimum age allowed in restricted/pit areas? _____
22. Is there a separated viewing area in the pits for children under age 14? Yes No
23. Is playground equipment located on the property? Yes No
If yes, what type equipment? _____

24. Is overnight camping permitted during non-race activities? Yes No
 If yes, do you have hook-ups? _____
25. Are worker stations attended? Yes No
26. Are aircraft permitted to land on the premises? Yes No
 What type and what purpose? _____
27. Is there any open water on your immediate property? Yes No
 If yes, how large? _____ How deep? _____
 If yes, is it completely fenced in? Yes No
28. Age of grandstand _____ Seating capacity _____ Avg. Attendance _____
 How often is grandstand inspected for slip/trip/fall/collapse exposures? _____
29. Is a K&K approved Waiver and Release form read and signed by all participants and other persons permitted in restricted areas? Yes No
30. Are other releases used? Yes No

F. SECURITY

1. What type and how many security personnel are provided?
 Sheriff _____ Local Police _____ State/Prov. Police _____ Private _____
2. Security personnel are hired as: Employees By contract
 If by contract, do you require a certificate of insurance from them? Yes No

G. SUBCONTRACTORS (gas, welding, ambulance/medical, wrecker, fire equipment, others)

1. Do you sub-contract any of the following work or have the following independent contractors?
 Fuel Tires Welding Other automotive Ambulance/Medical
 Wrecker Fire Equipment Food Vendor Souvenirs Liquor Vendor
 Fireworks Shooter Stunt Performers Portable Toilets Other: _____
2. Are certificates of insurance on file from each subcontractors naming your organization as an additional insured? Yes No

H. GENERAL FACILITY INFORMATION

1. Track Name: _____
2. Track Address/Location: _____
 City: _____ State: _____ Zip: _____
 Phone:(_____) _____ Fax:(_____) _____
3. Do you currently purchase any of the following insurance coverages?
 Primary Fireworks Liability Employment Practices Liability Liquor Liability
 Workers Compensation Commercial Auto Directors & Officers Liability
 Property Crime Inland Marine
4. Are you planning any of the following ancillary events or intermission shows, either on or off premises?
 Swap meets Driving Schools Concerts
 Monster Trucks Skydivers Stunt Performers
 Pyrotechnic Performers Jet Car Burns Coin Tosses
 Kids Bike Races Amusement Rides Fireworks Displays
 Trade Shows Mall Shows Other: _____
5. Will you subcontract or promote these events yourself? _____

I. EVENT LOCATION DIAGRAM (new Insureds only)

On a separate sheet, draw a diagram of the property and the track, use the symbols shown in brackets for illustration purposes.

- Spectator Viewing Areas **[SV]**
- Restricted Areas = **[RA]**
- Ambulance Security Personnel = **[A]**
- Concessions = **[C]**
- Fire Extinguishers = **[X]**
- Fences **[(draw a long dashed line) Over 5 feet: _____]**
[(draw a short dashed line) Under 5 Feet: _ _ _ _ _]
- Show the Distance Between Track and Nearest Crowd Control Fences
- Spectator Parking Areas **[SP]**
- Pit Areas = **[PA]**
- Security = **[S]**
- Restrooms = **[RR]**
- Barriers **[(draw a solid line) _____]**

I understand that the insurance company in determining whether to provide a quotation for insurance coverage will rely on the information contained in the application and all other information being submitted. I hereby warrant, represent and confirm that, to the best of my knowledge, all information provided is complete, true and correct.

Applicant's Signature

Producer's Signature (if applicable)

Applicant's Name (print)

Producer's Name (print)

Date

Date