

Date:

## Off-Road Vehicle (ORV) Guided Tours Supplement

**Policy Number:** 

Named	Insured: Brokerage Name:
1.	Will the off-road vehicle(s) be rented to minors? If yes, what % of the time, and will the minor(s) be accompanied by adults?
2.	Will the off-road vehicle(s) carry passengers? If yes, what % of the time.?
3.	Will all participants sign a liability waiver that has been approved by a legal professional who is proficient in sports and recreational activities?
4.	How many years have the Named Insured(s) been in the business of Guided Tours?
5.	Please describe the maintenance and inspection process on the off-road vehicle(s).
6.	Please confirm the vehicle(s) will not be used for racing, stunting or organized competitive events at any time (Example: mud bogs)?
7.	Does the Named Insured(s) have an active Commercial General Liability in place with a minimum of \$2,000,000 per occurrence limit with an injury to participant extension?
8.	Will the vehicle(s) carry underlying liability coverage elsewhere? If yes, how much?
9.	Have there been any previous claims or known incidents? If yes, please provide the date of loss, description of the loss, amount paid and if claims are open or closed.