

# EAST BAY REGIONAL PARK DISTRICT

Brazilian Room/ Lake Temescal Beach House/ Fern Cottage/ Shoreline Center

**Facility Reservations: (888) 327-2757 (Option 2)**

**(510) 635-5502 Fax**

---

## **Special Event Insurance Information**

These rates apply to **2010 only**

2011 rates will be available late November, 2010

(If you have a January event, you will be contacted by Reservations with special directions)

The East Bay Regional Park District requires the User of the Rental Facility to maintain a comprehensive **general liability** insurance policy in an amount equal to or greater than \$1,000,000 (one million dollars) which is endorsed to name the **East Bay Regional Park District (EBRPD)** as an **additional insured** for the day of your event, and to provide the EBRPD with a certificate of insurance with endorsement as proof of this coverage.

There are two ways in which this requirement can be fulfilled:

- 1) You may go through your insurance agent to modify your home owners or business insurance policy to meet these requirements. The certificate with additional insured endorsement naming the East Bay Regional Park District is due from your agent at least one month prior to your event.
- 2) Through a program managed by Diversified Risk Insurance Brokers, facility users may purchase a one day special event general liability insurance policy from the East Bay Regional Park District Reservations office. See the Quotation Premium form for the breakdown of insurance fees based on the number of attendees at your event.

To obtain this insurance, you will need to complete and return the following forms: **Event Holder Questionnaire and Premium Quotation form**. These forms may be turned in with payment at any time in 2010 at least two month prior to your event date. Payment may be made using a Visa or MasterCard.

If any money changes hands between the User and guests and you are serving food and/or beverage during your event, you will be charged an additional insurance fee. If you are selling beer, wine, or champagne a permit from the Alcohol Beverage Control Board is required and there will be an additional Liquor Liability fee added to your premium.

Payment may be taken care of over the phone using a Visa or MasterCard. We accept faxed copies of these forms. Or, you may mail the insurance forms with a check made out to the East Bay Regional Park District (EBRPD).

**Insurance rates are subject to change at any time.**

Mailing address for Insurance:

**East Bay Regional Park District  
Attention: Facility Reservations  
P.O. Box 5381  
Oakland, CA 94605-0381**

# EVENT HOLDER QUESTIONNAIRE

Name and Address of Renter or Event Holder:

---

---

---

Event Contact Person: \_\_\_\_\_  
(Authorized to sign all documents)

Daytime Phone Number \_\_\_\_\_

## EVENT INFORMATION

Date(s) Held: \_\_\_\_\_ Time: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Detailed Description of Event: \_\_\_\_\_

---

---

---

Total Attendance (**per day**) including all participants, spectators, guests, exhibitors, performers, entertainers, volunteers and employees:

Day One _____	Day Four _____	Day Seven _____
Day Two _____	Day Five _____	Day Eight _____
Day Three _____	Day Six _____	Day Nine _____

### Additional Event Exposures

Yes      No

Vendors/Exhibitors/Concessionaires?	_____	_____	How Many?	_____
Caterer?	_____	_____		
Liquor Served?	_____	_____		
Liquor Sold?	_____	_____		
Food/Non-Alcoholic Beverages Served?	_____	_____		
Food/Non-Alcoholic Beverages Sold?	_____	_____		
Entertainment Activities? ( <b>Provide a List</b> )	_____	_____		

Have you held this event or a similar event in the past?  Yes  No

If yes, have accidents, incidents, claims or loss arisen from such event?  Yes  No

Please review contracts and attach a separate sheet, listing names and addresses of all parties requiring to be named as Additional Insured. **This vendor form is to be turned in to the Facility staff two weeks prior to the event.** Their fax number is (510) 845-3614.

The event premium includes a premium charge for the facility owner/lessor as additional insured.

Quotes for 2010 only

## PREMIUM QUOTATION FORM

### Premium Quotation

<b>Guest Count</b>	<b>Coverage</b>	<b>Premium</b>	<b>Taxes &amp; Fees</b>	<b>Processing Fee</b>	<b>Totals</b>
<b>1-50 Guests</b>	General Liability	\$67.00	\$2.16	\$30.00	\$99.16
<b>51-225 Guests</b>	General Liability	\$111	\$3.58	\$30.00	\$144.58
	Liquor Liability (if applicable)				
	Vendor (if applicable)				
	Excess Limits (if applicable)				

Please sign and return this sheet with the Short Event Questionnaire.

Thank you

Signature: \_\_\_\_\_

Date: \_\_\_\_\_