

## Special Event Insurance Information

Brazilian Room/ Lake Temescal Beach House/ Fern Cottage/ Shoreline Center  
**Facility Reservations: (888) 327-2757, Option 2**  
**(510) 635-5502 Fax or [reservations@ebparks.org](mailto:reservations@ebparks.org)**

Dear 2013 Facility Renter,

The East Bay Regional Park District requires the User of the Rental Facility to maintain a comprehensive insurance policy in an amount equal to or greater than **general liability \$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 more than four months prior to your event.

**OR**

- 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 Premium Quotation chart on the back of this letter for the breakdown of insurance fees based on the number of attendees at your event.

To obtain one-day special event general liability insurance, you will need to complete and return the **Event Holder Questionnaire form** found on the back of this letter. This form must be turned in when your rental fees are due, **120 days prior to your event date**. Payment may be made using a Visa or MasterCard credit card. Early completion is encouraged and sincerely appreciated.

Payment may be taken care of over the phone using a Visa or MasterCard. We accept mailed, faxed or emailed copies of this form. Or, you may mail the insurance form 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**  
[reservations@ebparks.org](mailto:reservations@ebparks.org)

**SPECIAL EVENT LIABILITY GROUP INSURANCE TRUST, RPG**  
 Quotes for 2013 only\*

Guest Count	Coverage	Premium	Taxes & Fees	Processing Fee	Totals
<b>1-25 Guests</b>	General Liability	\$35.00	\$1.14	\$30.00	\$66.14
<b>26-50 Guests</b>	General Liability	\$68.00	\$2.21	\$30.00	\$100.21
<b>51-150 Guests</b>	General Liability	\$75.00	\$2.44	\$30.00	\$107.44
<b>151-250 Guests</b>	General Liability	\$93.00	\$3.02	\$30.00	\$126.02
	Excess Limits (if applicable)				

\*2014 rates will be available in November 2013

**EVENT HOLDER QUESTIONNAIRE**

Name of Renter or Event Holder: **(Same as on Rental Contract)** \_\_\_\_\_

Rental Contract # \_\_\_\_\_

**EVENT INFORMATION**

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

Event Location: (circle one) Brazilian Room Lake Temescal Beach House Fern Cottage Shoreline Center

Description of Event: (circle one) Social or Meeting

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

Day One \_\_\_\_\_ Day Two \_\_\_\_\_ Day Three \_\_\_\_\_

<u>Additional Event Exposures</u>	<u>Yes</u>	<u>No</u>	<u>How Many?</u>
Vendors/Exhibitors/Concessionaires?	_____	_____	_____
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 fill out on a separate sheet, the names and addresses of all parties requiring to be named as Additional Insured. **This vendor form is to be turned in to the Reservations staff when purchasing Insurance.**

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

Please sign and return this sheet to the Reservations Staff. Thank you.

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_