1 SCOTTSDALE INSURANCE COMPANY%

Home Office: One Nationwide Plaza • Columbus, Ohio 43215
Administrative Office: 8877 North Gainey Center Drive • Scottsdale, Arizona 85258
1-800-423-7675 • Fax (480) 483-6752

RACING SPECIAL EVENTS SUPPLEMENTAL APPLICATION

(Complete in addition to Special Events Application: GLS-APP-9s)

1.	Named Insured:				
2.	Track Name:				
3.	Promoter's and/or Sponsor's Name:				
4.	Type of Race(s) (i.e., Stock Cars, Sprint or Midget, Motorcycles, ATVs, 4 Wheelers, Tractors, Trucks, Semi-Trucks, Snowmobiles, etc.):				
5.	Number of Event dates planned for current year: Number of Events held last year:				
6.	Annual Receipts: \$				
7.	Average attendance per Event date: Maximum attendance per Event date:				
8.	Track Description:				
	A. Attach diagram showing the following:				
	1. Location of all grandstands/bleachers and any other area where spectators are allowed;				
	2. Pit area location including entrance and exits;				
	3. Location of debris fence and barriers;				
	4. Location of designated parking areas;				
	5. Location of all concessions, rest rooms, medical facilities, etc.;				
	6. Location of crowd control fences; and				
	7. Shape of track (straight, oval, serpentine, etc.).				
	B. Length of track:				
	C. Track surface (dirt, concrete, asphalt, other):				
9.	Barriers:				
	Construction type/material:				
	Height:	Thickness:			
	How many feet from the lowest set of seats or spectator area to the barrier?				
	Does barrier protect:	Pit Area?	Yes	☐ No	
		Spectator Areas?.	Yes	☐ No	
		Private Property?.		☐ No	

10.	Debris Fence:					
	Fence post material (wood, concrete, m	etal):				
	Number of feet between fence posts:					
	Height above racing surface:					
	Type/gauge of fence wire:					
	Does debris fence protect all Spectator Areas?					
11.	Seating:					
	Grandstand or bleacher seating capacity:					
	Grandstand/bleacher construction material:					
	Age:					
	Are spectators permitted to sit in:	Their autos to watch the race?	☐ No			
		The infield? Yes	☐ No			
		The pit area? Yes	☐ No			
	Are there grandstands in the pit area?	□ Yes	☐ No			
	Are the grandstands in the pit area prote	ected by a barrier? 🗌 Yes	☐ No			
12.	Are there any playground/amusement ri	ides on the premises? 🗌 Yes	☐ No			
13.	Is there a medical or first aid facility on t	the premises? 🗌 Yes	☐ No			
14.	Does the applicant have a Web Site?	☐ Yes	☐ No			
	If Yes, provide the Web Site address:					
15.	Contact Person:		·			
	Phone Number:					
	PPLICABLE IN THE STATE OF NEW YO					
an tio	ce or statement of claim containing any r n concerning any fact material thereto, co	to defraud any insurance company or other person files an application materially false information, or conceals for the purpose of misleading ommits a fraudulent insurance act, which is a crime, and shall also be follars and the stated value of the claim for each such violation.	g, informa			
FF	RAUD WARNING:					
an tio	ce or statement of claim containing any	to defraud any insurance company or other person files an application materially false information or conceals for the purpose of misleading mmits a fraudulent insurance act, which is a crime and subjects such	g, informa-			
PF	RODUCER'S SIGNATURE:	DATE:				
AF	APPLICANT'S SIGNATURE:DATE:					
ΑC	SENT NAME:	AGENT LICENSE NUMBER				

(Applicable to Florida Agents Only.)