



1712 Magnavox Way
Fort Wayne, Indiana 46801-2338
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www.kandkinsurance.com
CA #0334819

CAMPGROUND RENEWAL APPLICATION

Name of Insured: _____

1. **Total Annual Revenue:** \$ _____

Dates of season: _____

Number of campsites: # _____

Camp site rental: \$ _____

Gas/LP: \$ _____

Restaurant: \$ _____

Boat rental: \$ _____

Liquor: \$ _____

Bike rental: \$ _____

Grocery store: \$ _____

Other: \$ _____

Off-Season Storage of Personal Trailers, Boats, etc: \$ _____ (must provide copy of the storage agreement)

2. Please indicate if there have been any changes to the following:

Emergency/Safety Plans

☐ Yes ☐ No

Management

☐ Yes ☐ No

Operations/Site Layout

☐ Yes ☐ No

Activities/Special Events

☐ Yes ☐ No

Buildings/Premises

☐ Yes ☐ No

Autos/Drivers

☐ Yes ☐ No

Lease Agreements

☐ Yes ☐ No

LPG Gas Procedures

☐ Yes ☐ No

If any of the above questions were answered "Yes" as respects changes from last year, please explain: _____

Are there any changes to Watercraft (type/size/number)?

☐ Yes ☐ No

If yes: Canoes/Rowboats \$ _____ Boats up to 15HP # _____ Boats 16-76 HP # _____ Boats over 76 HP # _____

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 (MM/DD/YYYY)

Date (MM/DD/YYYY)