



# Cross Country Ski application

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Schenectady, NY 12301  
MerriamInsurance.com  
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Date of Application \_\_\_\_\_

Are you a member of CCSAA? Yes\_\_ No\_\_

1). Named Insured \_\_\_\_\_

2). Mailing Address \_\_\_\_\_

email address \_\_\_\_\_

web site address \_\_\_\_\_

3). Location of Operations \_\_\_\_\_

4). Type of Operation: Individual\_\_ Partnership\_\_ Corporation\_\_ LLC\_\_

5). Contact Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Fax Number \_\_\_\_\_ FEIN Number \_\_\_\_\_

6). Operations: Year Round\_\_ Seasonal: From \_\_\_\_\_ to \_\_\_\_\_

7). Years in Business \_\_\_\_\_ (This named insured)

8). Do you provide guided tours? Yes\_\_ No\_\_

List Guide Information as Follows:

Name    Age    Years Experience

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9). What percentage of your operations are on:

Forest Service Land \_\_\_\_\_ % Wilderness Acres \_\_\_\_\_ % Owned or leased  
Land \_\_\_\_\_ %

10). Has the business, owners or partners or principal shareholders ever voluntarily surrendered or had any license refused, suspended or revoked? Yes\_\_ No\_\_

If yes, please

explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11). Please select your Umbrella Limits: \$1,000,000\_\_ \$2,000,000\_\_ \$3,000,000\_\_  
Other \$ \_\_\_\_\_

12). Please provide a list of Additional Insureds (On separate paper)

**Property Insurance:**

13). Building Address \_\_\_\_\_

14). Do you own the building Yes\_\_ No\_\_ Basement: Full\_\_ Partial\_\_ None\_\_

15). Construction Type (wood frame, brick, masonry, other) \_\_\_\_\_

16). Year Built \_\_\_\_\_ Year of last renovations \_\_\_\_\_ Type of renovations \_\_\_\_\_

17). Square feet \_\_\_\_\_ Number of Stories \_\_\_\_\_ Number of Guest Rooms \_\_\_\_\_

18). Distance to nearest Fire Hydrant \_\_\_\_\_

19). Distance to nearest Fire House (miles) \_\_\_\_\_ Name of Fire District \_\_\_\_\_

20). Type of Burglar Alarm System: None\_\_ Central Station\_\_ Direct\_\_ Local Gong\_\_

21). Type of Fire Alarm System: None\_\_ Smoke detectors\_\_ Sprinklers\_\_ Central Station\_\_ Local\_\_

22). Does your kitchen have a fire suppression system? Yes\_\_ No\_\_ Type \_\_\_\_\_

23). Do you have swimming facilities? Yes\_\_ No\_\_ Pool\_\_ Lake\_\_ River\_\_

Is it fenced? Yes\_\_ No\_\_ Lifeguard on duty? Yes\_\_ No\_\_

24). Building Insurance Limit \$ \_\_\_\_\_

25). Contents Insurance Limit \$ \_\_\_\_\_

26). Deductible \$ \_\_\_\_\_

Please provide information for any additional buildings on separate paper

Please provide separate list of equipment used in operations (snowmobiles, grooming equipment, etc.)  
Include year, make, model and value of each piece of equipment to be insured.

**Merriam Insurance Cross Country Ski Areas Business Insurance Plan**

**Previous Carrier Information:**

27).

Carrier Expiration Date Annual Premium  
Property

General Liability

Crime

28). Gross Income derived from:

Cross Country Usage Fees \_\_\_\_\_

Mountain Bike Usage Fees \_\_\_\_\_

Nordic Ski Lessons \_\_\_\_\_

Snack Bar \_\_\_\_\_

Restaurant \_\_\_\_\_

Liquor Sales \_\_\_\_\_

Lodging \_\_\_\_\_

Winter Equipment Rentals \_\_\_\_\_

Bike Rentals \_\_\_\_\_

Guided Tours \_\_\_\_\_

Retail Sales \_\_\_\_\_

Other (please explain) \_\_\_\_\_

29). Do you have an avalanche exposure? Yes\_\_ No \_\_

30). Kilometers trails groomed \_\_\_\_\_

31). Kilometers un-groomed \_\_\_\_\_

32). Number of Ski Instructors \_\_\_\_\_

33). Number of "other" Instructors \_\_\_\_\_ Please explain activities

34). Are there any motorized vehicles (for other than maintenance or grooming purposes) allowed on trails?

Yes\_\_ No\_\_

35). Do you have a ski patrol? Yes\_\_ No \_\_

36). Is your ski patrol voluntary? Yes\_\_ No \_\_

37). Is the ski patrol certified in first aid? Yes\_\_ No \_\_

38). Is your center affiliated with an alpine ski area? Yes \_\_ No \_\_

**Automobile Insurance**

39). Please list vehicles to be insured:

Year Make Model Cost New How is it used?

40). Please list drivers:

Name Date of Birth License Number State

41). Please list accidents and violations in last 5 years:

**Merriam Insurance Cross Country Ski Areas Business Insurance Plan**