

Chris-Leef General Agency, Inc.
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Swimming Pool Maintenance and Management Supplemental Application

(COMPLETE IN ADDITION TO ACORD GENERAL LIABILITY)

Applicant's Name _____

MAINTENANCE

EMPLOYEE DATA	NUMBER	ANNUAL PAYROLL
Owner(s) only		\$
Cleaning: Full Time		\$
Part Time		\$
LEASED OR SUBCONTRACTED	NUMBER	ANNUAL COST
Owner(s) only		\$
Cleaning: Full Time		\$
Part Time		\$

1. Does applicant rent portable spas? Yes No
2. Does applicant manufacture or sell any products under their own label? Yes No
If yes, complete and submit Products application, GLS-APP-2
3. Any underground tanks, petroleum products, LPG, flammable liquids, or explosives stored on premises? Yes No
If yes, type and quantity stored: _____
4. Any equipment loaned, leased or rented to others? Yes No
If yes, describe type of equipment and annual rental receipts: _____
5. Does applicant subcontract work? Yes No
If yes, describe type of work.- _____
6. Are certificates of insurance obtained from subcontractors? Yes No
7. Does Applicant offer services other than pool services? Yes No
If yes, nature of service: _____
8. Are all chemicals EPA approved and stored in EPA approved containers? Yes No

POOL MANAGEMENT OPERATIONS

	NUMBER	NO. OF POOLS SERVICED ANNUALLY
Life Guards: Full time		
Part time		
Instructors: Full time		
Part time		
LEASED OR SUBCONTRACTED	NUMBER	ANNUAL COST
Leased employees		\$
Independent Contractors		\$

9. Are all lifeguards and instructors American Red Cross certified or equivalent? Yes No
Type of clients serviced:
 Municipal Pools Private Clubs Hotels/Motels Condo/HOA Lakes
 Ocean Beaches Water Amusement Parks Other (describe): _____
10. Any clients with wave pools or pools with slides or diving boards/platforms in excess of 10 feet? Yes No

Applicant's Signature

Date

Agent: _____

Agent Address: _____