

**ACCIDENT/MADISON INSURANCE COMPANY
SWIMMING POOL SUPPLEMENTAL APPLICATION**

Applicant:

1. Pool dimensions: Length Width
2. Are depth markings clearly indicated? Yes No (Decline)
3. What type of surface around pool area? (i.e: smooth, non-slip, etc.)
4. Diving boards? Yes (Decline) No
5. Water slides? Yes (Decline) No
6. Is the pool completely fenced with a self-locking gate? Yes No (decline)
7. Is the depth of the pool clearly marked along the sides of the pool? Yes No (decline)
8. Are "No Running" signs posted? Yes No
9. If pool chemicals are stored on site, are they kept in a locked container or locked room? Yes No
10. Are certified lifeguards employed? Yes (decline) No
11. Are certified lifeguards subcontracted? Yes No If "Yes", were you furnished with a certificate of insurance showing at least \$1,000,000 per occurrence general liability limits? Yes No (decline)
12. Are pool life saving devices easily accessible including a life saving ring and "Sheppard's hook"?
13. Are written emergency procedures present and a phone nearby? Yes No

Applicant's Signature: _____

Date: _____