



VALET SPECIAL EVENT QUESTIONNAIRE

(Complete for Special Event)

This Questionnaire is supplemental to and part of the Colony Specialty Garage Application (G1603) or the Colony Specialty Garage Renewal Application (G1603A).

Named Insured _____ Policy Number _____

- 1. Nature of the Special Event: _____
 - a) Address of Special Event for which you will provide valet service: _____
 - b) Date(s) of event: _____
 - c) Duration of event: 1 day (up to 12 hours) 2 days 3 days
 More than 3 days, specify duration: _____

- 2. What type of venue is this location? Restaurant Bar Country Club Church Other _____
 - a) If "Other" is this a private residence? Yes No
 If **Yes**, is there any street parking? Yes No
 If **Yes**, provide details: _____

3. For Events not at a private residence, is the parking lot on premises? Yes No

- 4. If any parking is **not on premises**, answer the following questions:
 - a. What is the parking lot address? _____
 - b. Will you drive customer's cars on or across a street to get to the lot? Yes No
 If **Yes**: i. is the street more than 2 lanes wide? Yes No
 ii. is the distance driven in either direction over 500 ft **from the podium**? Yes No
 - c. Will you park customer's cars on the street? Yes No
 If **Yes**, provide details: _____

5. How many spaces are reserved for valet parking for this Event? _____

6. Garagekeepers Legal Liability Limits required for this event (Deductible is the same as currently on policy):
 \$250,000 \$500,000 \$750,000 \$1,000,000 Over \$1,000,000

7. Is self-parking permitted? Yes No
 If Yes, is self-parking in an area separated from valet parking? Yes No

8. Where will you keep the customer's keys? _____

9. Will you refuse to give an obviously intoxicated customer his/her car keys? Yes No
 If "Yes", will you suggest or provide alternate transportation? Yes No

10. Will the lot be manned by an attendant when open? Yes No
 If "No", describe lot security: _____

11. Are you providing premises security for other than Valet operations? Yes No
 If yes, describe security ops: _____

12. Will you be hiring additional employees for this event? Yes No
 If yes, list names here and attach MVRs. _____