Roush Insurance Services, Inc.

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Agency	Phone
Address	Fax
City _	State Zip

Public Entity Application Convention/Civic Center Exposure (Exhibition Buildings, Arenas, Etc.) Questionnaire Q

Note: If the entity operates more than one, a separate questionnaire must be completed for each.

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Leç	egal Name of Public Entity: Effective Date:			
1.	. Description and address of each facility:			
2.	. Number of days in use:			
3.	. Description of any and all events or use:			
4.	. Attach certificates of insurance secured from individuals or organizations using the facility(ies).			
5.	. Area, square footage:			
6.	. Total occupancy capacity:			
7.	Are regular inspections conducted of all premises?	☐ Yes	□ No	
8.	. Are complaints and follow-up procedures documented in writing?	_ Yes	☐ No	
9.	tion purposes?	☐ Yes	☐ No	
	If yes, frequency?			
10.	. Is an Emergency Evacuation Plan in place?	Yes	☐ No	
11.	. Number of emergency exits:			
12.	Does the building have a sprinkler system?	☐ Yes	☐ No	
	a. How frequently is the system inspected?			
	b. When was the last inspection?			
	c. By whom?			
13.	3. Are smoke detector or fire alarms installed in buildings?			
	If yes, are fire alarms inspected and tested at best biannually?	Yes	∐ No	

14. Does fire protection/prevention equipment meet the NFPA codes?	🗌 Yes	☐ No
15. Are fire extinguishers visible, properly placed and inspected annually?	🗌 Yes	☐ No
16. Are safety/first-aid procedures in place?	🗌 Yes	☐ No
17. Are all building entrances and exits marked and unobstructed?	🗌 Yes	☐ No
18. Do adequate secondary exits exist and is panic hardware operable?	🗌 Yes	☐ No
19. Does emergency lightning meet NFPA codes?	🗌 Yes	☐ No
20. Does this structure meet NFPA Life Safety Codes?	🗌 Yes	☐ No
21. Are stairways, treads and handrails in good condition and free from tripping hazards?	🗌 Yes	☐ No
22. Are parking areas lighted and marked?	🗌 Yes	☐ No
23. Are sidewalks in good condition?	🗌 Yes	☐ No