

SECTION I – GENERAL INFORMATION:	
Policy Number:	
Named Insured:	
SECTION II – GENERAL LIABILITY INFORMATION:	
Number of Tanning Units:	
Type, Manufacturer, and age:	
Do you conduct spray tanning?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are only manufacturer recommended bulbs used?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are bulbs replaced according to manufacturer specifications?	<input type="checkbox"/> Yes <input type="checkbox"/> No
What is the maximum exposure time?	
Is eye protection required for use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is an attendant on duty at all times while in use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is a formal training program in place for employees?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any token/coin units?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please explain controls:	
Are all Timers controlled by the attendant?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please explain controls:	
What is the maximum exposure time?	
Are tanning units disinfected after each use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are signs posted per FDA requirements?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are customer logs maintained to prohibit more than 1 use in 24 hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are signed tanning booth waivers required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
In all States except CA, if under the age of 18 is a parent or legal guardian required to sign the waiver?	<input type="checkbox"/> Yes <input type="checkbox"/> No
In CA, all individuals using indoor tanning are 18 yrs old or older? <i>(Effective 1/1/2012, CA Law prohibits anyone under 18 years of age from using an ultraviolet tanning device.)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
How is age verified?	
Do you sublease space?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have cryotherapy? <i>(Please note that our program does NOT insure Cryotherapy.)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No

The applicant warrants that all answers to the questions on this application are true and correct. Any person who, knowingly and with intent to defraud any insurance company or other person, files an application for insurance containing false information, or conceals for the purpose of misleading information concerning fact thereto, commits a fraudulent insurance act, which is a crime.

Applicant Signature: _____ Date: _____