

Tenant User Liability Insurance Program (TULIP)

(formerly “Special Events Insurance”)

Internet based system instructions

Following is a 13 page document that will outline the system and what you can expect to see.

The questions on the website are very similar to the paper questionnaire utilized previously. It may be helpful to complete the paper document before going online so that you have an idea of the information you will need to complete the process. The system will walk you through the questions, one at a time, but if have difficulties or need assistance, please call 800/ 553-8368. Calling this number will put you in contact with the insurance carrier, K&K Insurance.

1. You will need to sign on to the internet at the following address. Instead of typing the address, please copy and paste the following website address
 - a. <http://www.kandkinsurance.com/sites/Tulip/pages/DioceseEligibility.aspx>
2. refer to following document for remaining instructions

The user can register if first time user; login if already a registered user; click on the down arrow beneath the words 'Get Quote/Buy Online', select a program and click on the 'Go' button to start the application process.

During the application process, all required fields need to be completed and any calculate buttons need to be clicked.

Enter the name and state of the diocese or parish. Click on the Search button.

A list of parish names will show on the screen.

1 Eligibility
 2 Rating
 3 Quote

Catholic Diocese TULIP – Eligibility

Enter the first few letters of the diocese or parish name, choose the state of diocese/parish and click the Search button. If your diocese or parish is not listed, please call us at **1-800-553-8368**.

Select your Diocese/Parish

* Diocese or Parish Name:

* Diocese or Parish State:

Please choose from the Diocese/Parishes listed below:

Diocese Name	Parish Name	Address
<input type="radio"/> Diocese of Shreveport	Blessed Sacrament School	2932 Murphy Street , Shreveport
<input type="radio"/> Diocese of Shreveport	Christ the King Church	423 McCormick , Bossier City
<input type="radio"/> Diocese of Shreveport	Christ the King Church	1000 Ogilvie St , Bossier City

Select the parish.

1 Eligibility
 2 Rating
 3 Quote

Catholic Diocese TULIP – Eligibility

Enter the first few letters of the diocese or parish name, choose the state of diocese/parish and click the Search button. If your diocese or parish is not listed, please call us at **1-800-553-8368**.

Select your Diocese/Parish

* Diocese or Parish Name:

* Diocese or Parish State:

Please choose from the Diocese/Parishes listed below:

Diocese Name	Parish Name	Address
<input checked="" type="radio"/> Diocese of Shreveport	Blessed Sacrament School	2932 Murphy Street , Shreveport
<input type="radio"/> Diocese of Shreveport	The Catholic Center	3500 Fairfield Ave , Shreveport

Click on the Continue button at the bottom of the screen

Select the type of event to be insured.

Quote

1 Eligibility — 2 Rating — 3 Quote

Catholic Diocese TULIP – Eligibility

Please select the type of event to be insured.

Eligible Events

<input type="radio"/> Anniversary party	<input type="radio"/> Cook-Off	<input type="radio"/> Play
<input type="radio"/> Auction	<input type="radio"/> Corn Hole	<input type="radio"/> Poker
<input type="radio"/> Awards banquet	<input type="radio"/> Dance	<input type="radio"/> Prom
<input type="radio"/> Awards presentation	<input type="radio"/> Debutante ball	<input type="radio"/> Quinceanera
<input type="radio"/> Baby shower	<input type="radio"/> Demonstration	<input type="radio"/> Raffle
<input type="radio"/> Bake sale	<input type="radio"/> Dinner	<input type="radio"/> Recital

Click the Continue button at the bottom of the screen.

***If the insured's event type is not listed above, DO NOT CONTINUE. Please contact our office for confirmation of eligibility at 1-800-553-8368.**

Back Continue

This is how the screen looks when it comes up.

As the questions are answered, some additional information will appear on the screen. The next page shows information that will appear on the screen as the questions are answered.

After all questions are answered, click the Continue button at the bottom of the screen.

Quote 1 Eligibility 2 Rating 3 Quote

Catholic Diocese TULIP- Eligibility

Desired coverage dates (including setup and teardown):
 [You may specify any day from 06/29/2012 to 12/29/2012]

Provide Attendance Information

Number of consecutive event days (not including set-up or tear-down):	<input type="text"/>
Estimated daily attendance of this event:	<input type="text"/>
Total event attendance:	<input type="text"/>

Are overnight accommodations part of the event? Yes No

Is there a live musical performance at the event? Yes No

Alcoholic beverages are (select one):

- Not available at the event
- Furnished without a charge ([what's this?](#))
- Sold ([what's this?](#))
- Both sold and furnished without a charge ([what's this?](#))

Does the insured event have any concessionaires, exhibitors or vendors? Yes No

Does the event have any of the following activities? Yes No

- Rides, mechanical amusement devices, inflatable recreational devices, dunk tanks, bungee operations/equipment
- Petting zoos or animals owned, rented or hired by the insured
- Fireworks/pyrotechnics

Catholic Diocese TULIP- Eligibility

Desired coverage dates (including setup and teardown): [You may specify any day from 06/29/2012 to 12/29/2012]

mm/dd/yyyy mm/dd/yyyy

Provide Attendance Information

Table with 2 columns: Question, Answer field. Rows: Number of consecutive event days (not including set-up or tear-down); Estimated daily attendance of this event; Total event attendance:

Are overnight accommodations part of the event? Yes No

Is there a live musical performance at the event? Yes No

If 'Yes' is selected, the question about the music appears on the screen.

Is the music rap/hip-hop/alternative? Yes No

Alcoholic beverages are (select one):

- Not available at the event
Furnished without a charge (what's this?)
Sold (what's this?)
Both sold and furnished without a charge (what's this?)

If either 'Sold' or 'Both sold and...' is selected, the question about the liquor license or permit appears on the screen.

In whose name is the liquor license or permit? Insured Caterer/Vendor Facility Sponsor

Does the insured event have any concessionaires, exhibitors or vendors? Yes No

If 'Yes' is selected, the question about vendor coverage appears on the screen.

Do the concessionaires, exhibitors or vendors currently have coverage? Yes No

If 'No' is selected, the 3 items indicated appear on the screen.

How many concessionaires, exhibitors or vendors need coverage at this event?

Are any of the following operations or products sold, displayed, demonstrated or promoted by the concessionaire, exhibitor or vendor? Yes No

Alcoholic beverage sales; Animals; Auto parts (mechanical); Body piercing or permanent tattooing; Christmas tree retail lots; Cleaning accessories & products- homemade; E-commerce selling; Fire safety equipment; Fireworks sales & displays; Haunted attractions; Health & beauty products-homemade; Hot wax impressions; Mazes (corn, hay, fence); Mechanical or inflatable amusement devices; Medical testing; Motorsports activities; Nutritional/health supplements (selling); On-site equipment sales/rental; On-site installation/service/ repair of products; Oxygen/aromatherapy bars; Protective equipment/apparel; Storefront operations; Tobacco products; Toys (for ages 4 and under); Vehicles in motion; Watercraft exhibits on water; Weapon sales; Weight-loss plans or products (selling); Wholesale business operations.

Does the event have any of the following activities? Yes No

If 'Yes' is selected, the grey box appears on the screen.

- Rides, mechanical amusement devices, inflatable recreational devices, dunk tanks, bungee operations/equipment
Petting zoos or animals owned, rented or hired by the insured
Fireworks/pyrotechnics

These activities are not covered by this program and resulting claims will be denied. You may continue to purchase coverage online with the understanding that these activities are excluded. If any of these activities are provided by a third party, you should require evidence of liability coverage (certificate of insurance) from the entity/organization naming you as an Additional Insured. If you require additional insurance for these activities, please discontinue the online process and contact us to determine if other programs are available.

Accept & continue Decline & exit

Back Continue

Select the appropriate button; click on the Continue button.

Quote

1 Eligibility
 —
2 Rating
 —
3 Quote

Catholic Diocese TULIP – Ineligible Operations

The following events/activities are ineligible for enrollment in this program and no coverage will be provided. To continue, you must first confirm that none of the following services are offered by the entity obtaining a quotation.

Activist rallies/marches/literature distribution	Gun/knife shows
Athletic events and competitions*	Haunted attractions
BYOB*	Historical battle reenactments
Cinematography & photography for commercial use	In-or-on water activities (pools, lakes, rivers, etc)
Concerts*	Mazes (corn/hay/fence)
Day Care Operations	Motorized vehicle/motorcycle/watercraft practicing for, qualifying for, or testing for any racing speed, demolition or stunting activity
Events held on an airport premises	Parades*
Events providing room accommodations and/or camping as part of the event	Rodeos* (activities including, but not limited to bull or bronco riding, roping activities, or barrel racing)

***This event/activity is not available online. Please contact K&K at 1-800-553-8368**

Are any of the above events/activities offered? Yes No

Back
Continue

The information entered on the Eligibility screen will populate the fields in the screen shown below. The premium will be shown in under the Total Event Attendance column.

Quote

1 Eligibility
 —
2 Rating
 —
3 Quote

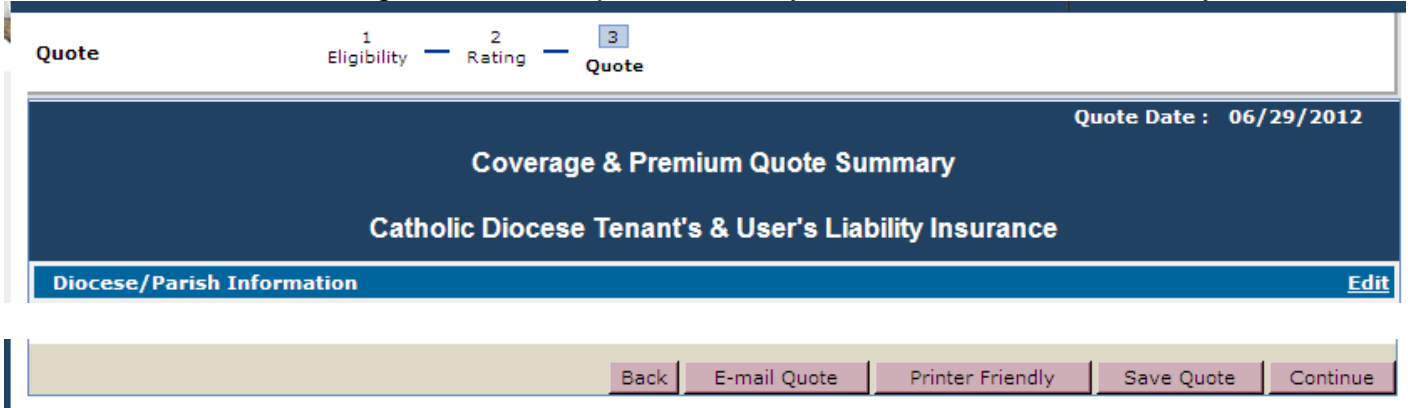
Catholic Diocese TULIP - Rates

Premium

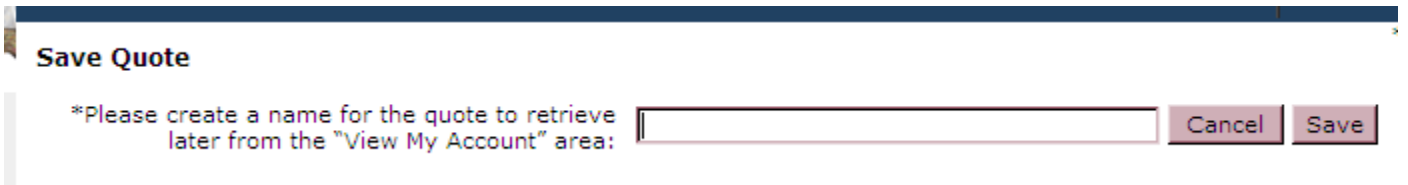
Commercial General Liability	Number of Event days	Overnight?	Number of Vendors	Total Event Attendance (attendees)
\$1,000,000.00				\$

Back
Continue

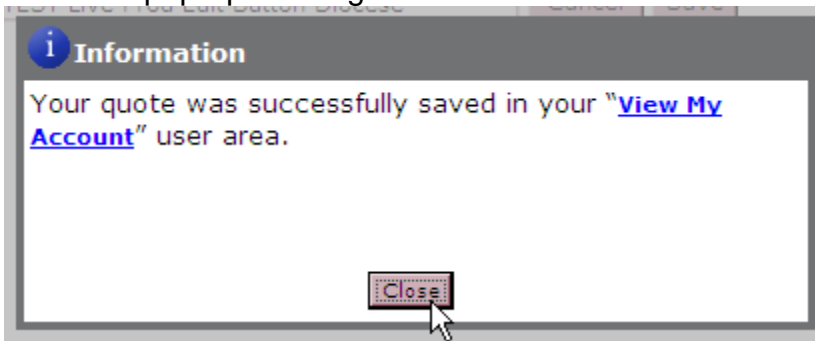
See the bottom of the quote summary screen for options available on this screen. You can click on the Edit button on the right side of the quote summary to edit a section if necessary.



If you want to save the quote you need to be logged in.



Close the pop-up message.



Click the 'Continue' button to continue the online application process.

If the user is not logged in, they will not see the 'Insured information is the same as login information' box. The 'State' field will be automatically filled with the data from the eligibility screen.

Enrollment **1** Insured Information — 2 Additional Information — 3 Certificate Request — 4 Warranty — 5 Final Summary — 6 Payment

** fields are mandatory*

Insured Information

IMPORTANT: THIS SECTION IS TO BE COMPLETED FOR THE PERSON OR BUSINESS PURCHASING COVERAGE

1. For the "Named Insured" use your name if you operate as a sole proprietor, or your legal business name if you operate as a corporation or LLC.

2. You will be asked to provide information for Additional Insureds later in the purchase process.

Insured information is the same as login information

*Named insured (as it should appear on the policy) ([what's this?](#)):

Doing business as (DBA) ([what's this?](#)):

*Contact first name:

*Contact last name:

*Mailing address:

*City:

*State:

*Zip:

*Phone (including area code):

Cell (including area code):

Fax (including area code):

*E-mail:

*Re-confirm e-mail:

Website address (if any):

This is a new account

This is a renewal of coverage

Click the Continue button.

The fields highlighted in yellow below (for illustrative purposes only) will be automatically filled with the information entered earlier in the application process.

The user needs to complete the 'Name of event:' and 'Is the event held annually?' sections then click the Continue button.

The screenshot shows a web application interface with a navigation bar at the top containing six steps: Enrollment, Insured Information, Additional Information (highlighted with a blue box and number 2), Certificate Request, Warranty, Final Summary, and Payment. Below the navigation bar is the main form area titled "Event - Additional Information".

The form contains the following fields and sections:

- Name of event:** A text input field.
- Date(s) of event/coverage (including set up and tear down):** A text input field highlighted in yellow.
- Event location** section with the following fields:
 - Venue name:** A text input field highlighted in yellow.
 - Address:** A text input field highlighted in yellow.
 - City:** A text input field highlighted in yellow.
 - State:** A dropdown menu highlighted in yellow.
 - Zip:** A text input field highlighted in yellow.
- Is this event held annually?** A question with two radio button options: "Yes" and "No".
- Buttons:** "Back" and "Continue" buttons located at the bottom right of the form area.

The user completes the required fields and clicks the Continue button.

Enrollment 1 Insured Information 2 Additional Information 3 Certificate Request **4 Warranty** 5 Final Summary 6 Payment

Warranty and Disclosure Statement

I understand that the insurance company, in determining whether to provide insurance coverage, will rely on the information contained in this form and all other information being submitted. I hereby warrant, represent and confirm that, to the best of my knowledge, all information provided is complete, true and correct.

I accept

K&K Insurance Group, Inc. as managing general underwriter for the insurance company, receives compensation from the insurance company in consideration for its performance of insurance services that include, but are not limited to; underwriting, policy/certificate issuance, administration and claims handling. The insurance company compensates K&K, based on a predetermined calculation of thirty-three percent of the total premium. The total may also include an RPG membership fee of up to ten dollars.

I understand that, subject to applicable laws, K&K Insurance Group, Inc. will invest the premium and, in accordance with the permission of the insurer, will receive any interest or other income that the premium generates prior to remittance to the insurer.

I accept

I am aware that the insurance company expects accurate reporting for my premium calculation, and should my figures exceed my estimates during the coverage term I will make arrangements to pay the additional premium. I understand that my book and records may be examined or audited by the insurance company at any time during the coverage period and up to three years thereafter. Intentional misrepresentation or misreporting may jeopardize coverage. K&K reserves the right to decline/void any ineligible coverage.

I accept

I further acknowledge that, I have reviewed all information provided with this enrollment form and understand the exclusions which apply, as well as the activities and operations for which coverage is not provided. The information I provided on this enrollment form becomes a part of the insurance contract.

I accept

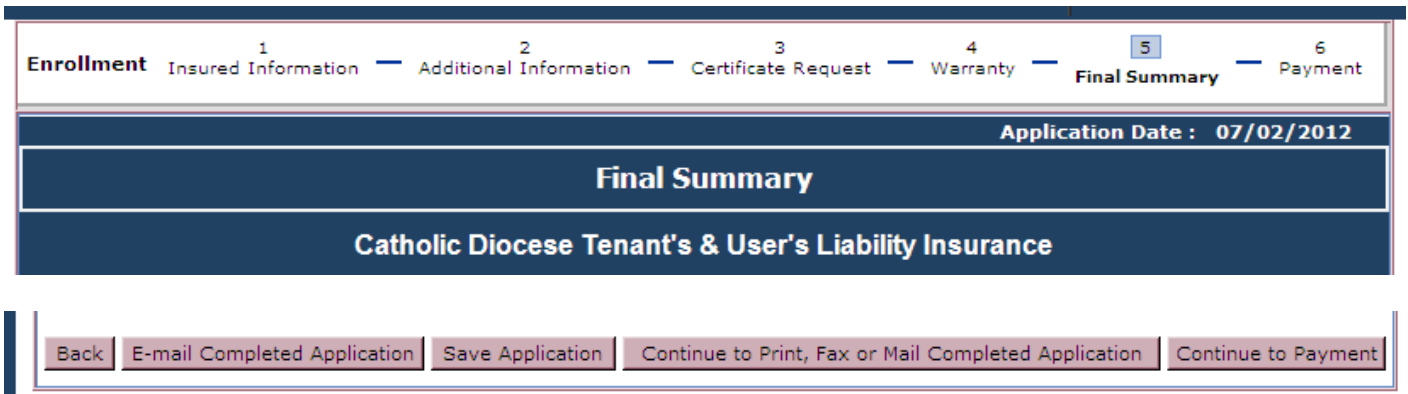
Name of person completing this form:

First name:

Last name:

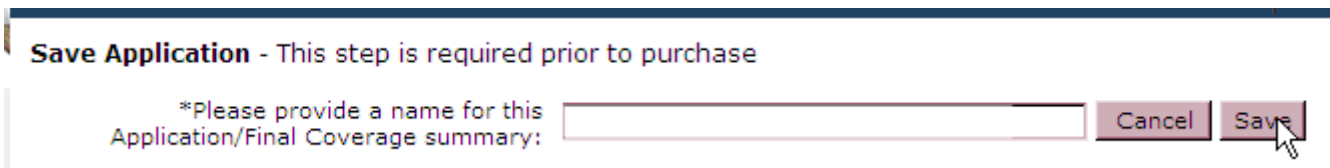
Relationship to insured:

See the bottom of the final summary screen for options available on this screen.

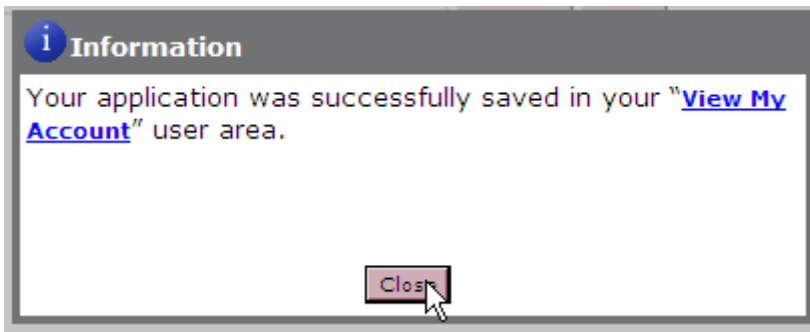


Saving the application is a required step to purchase coverage. It is also required if you want to save the information on the application and purchase later.

If the application was saved at the quote summary, the name given to the document will show in the name field on this screen.



Close the pop-up message.



Click on the 'Continue To Payment' button at the bottom of the final summary screen.

The user selects the method of payment and clicks the Continue button. The appropriate screens will come up for the method of payment selected.

Enrollment 1 Insured Information — 2 Additional Information — 3 Certificate Request — 4 Warranty — 5 Final Summary — 6 **Payment**

Make Your Payment

Note: Premiums are 100% fully earned when coverage begins and are non-refundable.

Please complete the payment information below.

CREDIT CARD PAYPAL CHECKING ACCT

After the payment has been processed the purchase summary screen will come up. From here the insured can print out the coverage documents. An email will also be sent to the registered user's email address containing the purchase summary along with the coverage documents.