

BOLLINGER, INC.

101 JFK Parkway, Short Hills, NJ 07078
Toll Free: 800-446-5311 Fax: 973-467-0759

PESTICIDE / HERBICIDE LIABILITY QUESTIONNAIRE

Name of Country Club: _____

Are your employees licensed to apply pesticide/herbicides for the following types of application?

_____ Turf _____ Water _____ Trees

Please list employees' names, current license numbers and license expiration dates: _____

List all banned for use chemicals that have been applied over the last (5) years or are now being applied to your golf course. Please include:

- a. Approximate amount of the chemical per application or per year.
- b. Approximate date that use was discontinued.
- c. Method of disposal.

Do you use licensed independent contractors for application? ____Yes ____No If so, what type of application is performed AND **confirm** that you obtain Certificates of Insurance from these contractors including Comprehensive General Liability including Products/Completed Operations.

1. Pesticide Storage Building/Room:

a. Construction of building: Frame () Masonry () Non-Combustible () Other (describe)_____

b. What is floor construction: Poured concrete () Wood () Dirt ()

c. Any floor drains in room: Yes () No () If drain, where does it drain to:_____

d. Storage room completely enclosed by a 4" sill: Yes () No () (REQUIREMENT OF PROGRAM)

e. (CIRCLE) Building used for permanent or temporary residence Y N rest areas Y N food preparation areas Y N

If yes, explain:_____

f. Does the chemical storage area have mechanical or natural ventilation to the building exterior? Yes () No ()

g. Describe how storage room secured and separated from other building areas:_____

h. Warning signs posted () Storage area secured at all times with lock and key ()

i. How are pesticides stored: On floor/ground () On wood () Pallets () Metal Shelves () Wood racks () Other_____

j. On a separate sheet of paper list all pollution or environmental damage claims (including unpaid claims or complaints) which have occurred in the past (5) years. If none, so indicate:_____

k. Have you ever received any clean-up orders in the last (5) years? If yes, describe on separate page.

l. Are there any local, state, or federal statutes, standards or regulations with which you do not comply? If yes, explain on separate sheet of paper.

I declare that to the best of my knowledge and belief, all of the forgoing statements are true, and that these statements are declarations upon which this insurance policy may be issued:

Signature of Insured

Title

Date: