



Salt Lake City Area Office
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Chicago, IL 60606
800-456-4576 • Fax 888-408-8081

GO-KARTS
ACTIVITIES

Note: Coverage will only be considered if the Insurer has received, or will receive with this Supplement, a properly completed and signed General Recreation Application.

Applicant's Name: _____

Applicant's Mailing Address: _____

City: _____ State: _____ Zip: _____

E-Mail: _____ County: _____

Business Telephone Number: () _____ Fax: () _____

1. Area of land track occupies: _____ Acres: _____

2. Is land: Leased Rented Owned by Insured

3. Months of Operation: From: _____ To: _____

4. Is track used for rental concessions of the Insured's owned go-karts? Yes No

5. Type of track: Asphalt Dirt Oval Road

6. Length of track: _____ feet

Longest straightway: _____ feet

7. Maximum speed of go-karts: _____ m.p.h.

8. Minimum age and height of go-kart operators: age _____ feet _____ inches _____

9. What is the maximum number of go-karts in use at any one time? _____

(WARNING: If track is found to exceed this amount, coverage is void.)

10. Estimate gross receipts for the next twelve months: \$ _____