2022 - 2023 RETAILER & RESORT INSURANCE APPLICATION

EXCLUSIVELY FOR PADI RETAILER & RESORT MEMBERS IN THE UNITED STATES



PLEASE PRINT CLEARLY PADI Retailer/Resort No.

Legal Business Name	POLICY PERIOD 12 Month policy from initial effective date.
DBA	IMPORTANT:
Corporation Partnership LLC SOLE PROPRIETOR	To maintain continuous coverage from 30 June 2022 – completed applications with proper payment must be received at Vicencia & Buckley, a division of HUB
Owner(s) / Percentage	International, AND APPROVED BY THE INSURANCE COMPANY BEFORE 30 June 2022. There is no grace period.
Mailing Address	Do not delay, submit your application today!
City State	You are insured when this completed, signed application with correct payment is received by Vicencia & Buckley, a
Country Postal/Zip Code	division of HUB International, AND APPROVED BY THE INSURANCE COMPANY. You will receive a Certificate of
Physical Address	Insurance as confirmation. PADI will be notified that your coverage is in force.
Insurance decision maker(s) / contacts involved in buiness - name, role, contract #, e-mail	Base Policy limits: \$1,000,000 per occurrence / \$2,000,000 annual aggregate.
Name Title	Brochure and applications are for illustration purposes only
Phone No. Fax	and are designed as a general description of the policies. The actual policy language will determine coverage.
Email	Coverage available in the 50 United States, District of
Website	Columbia, Puerto Rico, Guam, US Virgin Islands, Northern Mariana Islands and American Samoa.
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Select your application delivery method and retain confirmation of delivery. DO NOT submit duplicate applications. **Select ONE**:

Fax: 714-739-3188 **Email**: divestore@diveinsurance.com

Mail: Vicencia & Buckley, a division of HUB International, 6 Centerpointe Drive, Suite 350, La Palma, CA 90623-2538

To ensure you receive a professional quote on a program designed specifically to meet your business needs, please complete the questions on pages 2 and 3 of this application.

If you have any questions about how to complete the application, please call Vicencia & Buckley, a division of HUB International, at **800-223-9998** or **714-739-3177**. Someone will be happy to walk you through the application process. Please continue on page 2 of this application.

CHECKLIST

- Ensure the correct name and address are on the application. Please include phone and email.
- List Additional Insureds on page 5.
- List all dive professionals for the Retailer/Resort Instructional Policy on the form provided (10265).
- Include application 300DT for each dive professional insured under the Retailer/Resort Instructional policy.
- Read and sign the Statement of Understanding on page 4.
- Phone, fax, or email (do not send duplicates) to Vicencia &
- Buckley, a division of Hub International.

PREMIUM PAYMENT

Upon receipt and review of the complete application, Vicencia & Buckley, a division of HUB International, will provide you with a total premium for your approval before coverage is placed. Upon your acceptance of the policy and premium, credit card information can be provided to Vicencia and Buckley, a Division of HUB International or a check/money order mailed.

If your application is incomplete, it will be returned to you for completion.

PLEASE ADD OUR DOMAINS

@hubinternational AND @diveinsurance AND @eoxvantage.com. TO YOUR SAFE SENDERS LIST!

PLEASE PRINT CLEARLY, and complete this form for all locations.		
Is the applicant in bankruptcy or receivership? Yes No		
Include <i>all activities from your business that will be claimed on taxes.</i> Prior 12 months' total gross receipts: \$		
Estimated next 12 months' total gross receipts: \$		
Is this a new business? Y/N Date business started: Years in business? A detailed description of business activities (specifically, and by location) – All activities must be disclosed.		
Schedule of Activities & Gross Revenue: (Attach a separate sheet if needed) Dive instruction gross revenue:		
List type of diving lessons:		
Guided recreational dive tours' gross revenue:		
Foreign dive tours? If yes, describe, and provide the gross and the number of tours done internationally:		
Dive equipment rental gross receipts:		
Describe dive equipment rented:		
Dive equipment sales gross receipts:		
Dive equipment service/repair gross receipts:		
Other diving related activities, please explain:		
Other business activity, please explain:		
Total number of employees:Total number of independent contractors used:		
Total number of dive professionals: Employed Independent Contractors		
Minimum age for employees or independent contractors?		
Minimum age for employees or independent contractors? How often is equipment checked/maintained? Are maintenance records kept: Yes		
What is the guide/instructor to participant ratio under ideal conditions?		
Do you have a pool on-premises? Yes No If yes, contact Vicencia & Buckley, a division of HUB		
International, for a supplemental form.		
Current insurance history:		
Insurance company name:		
Liability coverage limits:		
Annual premium: Expiration date:		
 With your application, please include the following items, if available Brochure Advertising Materials Liability Waiver (if used) 		

- Operating Plan or Procedural Manual (optional)
- Staff Manual Emergency Plan
- Personnel Roster Registration Form
- First Aid Kit List / Safety Talk Outline
- Suggested Clothing/Equipment List

CLAIMS INFORMATION

Have you had any liability (i.e., slip and fall, other in-store liability) claims in the past five (5) years? Yes No If yes, please list the date of the claim, disruption of the claim, the amount paid, and any amounts outstanding.

Have you any known swim/snorkel/dive-related incidents or circumstances that have, or could potentially, lead to a claim in the past five (5) years?

Yes No If yes, please provide details:

OPTIONAL COVERAGES***

- Non-owned Auto Liability \$100,000 limit; \$1,000,000 limit
- Travel agents E&O 📕 Estimated 12 months gross receipts for travel: \$__
- Lake, quarry or pond Contact Vicencia & Buckley, a Division of HUB International for a supplemental form.
- Excess \$1 million limit; \$2 million limit; \$3 million limit; \$4 million limit; \$9 million limit
- Prior Acts Coverage: Requested Retroactive Date:
- Occurrence Form Coverage
- Active Shooter
- Communicable Disease Liability
- Abuse
- Do you conduct criminal background checks on all staff? Background checks should be done through a
 national registry. Yes No
- Has the applicant or any employees ever been convicted of child abuse or sexual abuse-related crime?
 Yes No
- Has the applicant ever had an allegation of sexual abuse or molestation? If yes, please provide details of the incident, the date, and the outcome. Yes No
- Assault or Battery
- Crisis Response Coverage
- Property Available upon request, in the U.S. only.

ADDITIONAL COVERAGE'S AVAILABLE FROM HUB INTERNATIONAL

(Please check the applicable boxes if you'd like a quote)

- Flood Insurance Workers Compensation (not available in all states)
- Employment Practices Liability Earthquake Cyber Liability Business Auto

* Please complete form #10265 and have each dive professional complete application #300DT. ** Non-PADI Pros not to exceed 25% of those insured under the Retailer/Resort Instructional Policy. *** Optional coverages are subject to underwriter review for acceptability.

STATEMENT OF UNDERSTANDING

Please Read and Sign

We (I) know and acknowledge no coverage is provided under this policy for Workers Compensation, Employers Liability, Employment Practices Liability, motorized watercraft, or non-motorized watercraft more than 20 feet in length.

The following operations are excluded. However, coverage for these operations (and others) can be included if they are properly disclosed to the insurance company and the applicable premium is charged.

- 1. Premise, service, concession, and/or facility maintenance operations and/or activities provided for or on behalf of others, including but not limited to lifeguard services, inflatable water amusement device maintenance and operations.
- 2. Travel agencies
- 3. Ski equipment sales, rental, or repair
- 4. Firearm Sales, Rental, or Repair. However, this exclusion does not apply to spearguns.
- 5. Resorts, spas, campgrounds, camps, recreational vehicle parks, paintball fields, and recreational facilities or operations, including but not limited to camping, playgrounds, gyms, sports courts and facilities, horseback riding, biking, tanning beds, laundry mats, and/or bathhouses.
- 6. Housing or habitational operations, including but not limited to cabins, bunkhouses, apartments, dwellings, boardinghouses, hotels, motels, and/or bed and breakfasts.
- 7. Restaurants, bars, and/or concession stands
- 8. Lessons for surfing, kayaking, paddleboarding, wakeboarding, waterskiing, parasailing, boating, or any other similar activity.
- 9. Sales, rental, repair, or usage of boats, personal watercraft, recreational or motorized vehicles/mobile equipment, or bicycles.
- 10. Any and all tours, including but not limited to boat, whale watching, bicycle, walking, or motorized vehicles/ mobile equipment tours.
- 11. Shark cage operations and activities
- 12. Construction operations or real estate development
- 13. Ownership, maintenance, handling, storage, distribution, sale, or use of fireworks, flash-powder, or explosive compositions.

Print Name	Signature	
Date		

ADDITIONAL INSUREDS/LOSS PAYEES

- 1. Additional Insureds are NOT automatically renewed.
- 2. Each Additional Insured will be individually reviewed for acceptability.
- 3. Additional Insureds do NOT need to be listed for coverage to apply to YOU.
- 4. If approved, Additional Insureds status only applies when required by written contract

5. Business relationship (confined water site; open water site; dive vessel operator; dive center/resort; etc.) must be provided for an Additional Insured to be considered.

6. Employees are automatically covered under your store/resort operator's policy (does not include Professional Liability).

7. Divemasters and instructors may not be added as additional insureds.

8. Your business's owners, officers, and directors are automatically covered under your policy and do not need to be added as additional insureds (does not include Professional Liability).

9. Additional names and addresses may be written on plain paper and attached to this application.

PLEASE PRINT CLEARLY

Name ____

Address ______City/State or Province_____

What is the Business Relationship between you and the requested Additional Insured?

Additional Insured - General Liability Additional Insured - Professional Liability Loss Payee

Is there a written contract between you and the requested Additional Insured requiring you to add this entity as an Additional Insured? Yes No

Name _____ Address

_____City/State or Province_____

What is the Business Relationship between you and the requested Additional Insured?

Additional Insured - General Liability Additional Insured - Professional Liability Loss Payee Is there a written contract between you and the requested Additional Insured requiring you to add this entity as an Additional Insured? Yes No

MULTIPLE LOCATIONS

*PADI Members with multiple locations may apply for a single policy to cover all locations. Under the multi-store policy, the single liability limit and policy aggregate is shared by all locations.

If you have more than one location and submit one application for multiple locations, complete page 2 for each location and complete the following: How many locations do you have?

Provide the address and member number of each location. Attach a separate sheet if necessary.

Retailer or Resort Member Number	Address
Facility Name	City / State or Province
	Zip or Postal Code / Country
Retailer or Resort Member Number	Address
Facility Name	City / State or Province
	Zip or Postal Code / Country

Also available: Dive Charter Boat Insurance Individual Professional Liability Insurance Employee Practices Liability Insurance

Does one insurance policy provide coverage for General Liability and Professional Liability?

Yes, To prevent potential coverage gaps, the PADIendorsed coverage now includes both coverages on one policy, ensuring that PADI Retailer and Resort members are properly protected.

Does the Liability policy cover "TecRec" services provided by the dive store/resort?

Yes. Coverage includes equipment sales, rentals, repair, and gas fills. Be sure to disclose all services provided on your application.

Does my store policy cover me if I'm sued by a staff member for wrongful termination, hostile work environment, or other similar employment practices claims?

No. To have coverage for these types of claims, you must secure an "Employment Practices Liability (EPL) policy designed specifically to cover these types of claims. Vicencia & Buckley, a division of HUB International, does have an optional EPL policy available for PADI Members in the United States, its territories, and possessions. Contact Vicencia & Buckley, a division of HUB International, for details and an application.

If I sell my store, can I transfer my policy to the new owner?

No, a change in ownership will require the new owner to complete a new application and receive a new quote.

Does my policy provide coverage for communicable diseases such as COVID-19?

Yes, it can. The enhanced PADI-endorsed insurance provides highly customizable coverage to meet your individual needs, including coverage for communicable diseases.

My business provides services for other watersports activities. Are these activities covered?

Yes, they can be covered. We understand that no two businesses are exactly alike and many PADI Members provide services in addition to scuba diving. Be sure to provide information for all the operations you may be conducting, so the policy provided can meet your business' specific insurance needs.

Who is Prime Insurance Company?

Prime Insurance Company is an A-rated stable carrier (by A.M. Best) with 40 years of experience providing coverage for hard-to-place specialty risks. A niche industry needs a niche insurance company.

* Producer is not affiliated with Prime Insurance Company, or any of its subsidiaries, and solely acts for and on behalf of the insured. Prime Insurance Company is an unlicensed excess and surplus lines insurance company domiciled in the State of Illinois and its principal place of business is in Sandy, Utah.

Why have Vicencia & Buckley, a division of HUB International, partnered with Prime Insurance? After an exhaustive search, Vicencia & Buckley, a Division of HUB International, and PADI chose to partner with Prime for their solution-based approach to coverage and their reputation for providing exceptional claim service.



A Division of HUB International Insurance Services, Inc.



For information and quotes, contact: Vicencia & Buckley, a division of HUB International 6 Centerpointe Drive, Suite 350, La Palma, CA 90623-2538

714-739-3177 • 800-223-9998 • FAX 714-739-3188 Email: divestore@diveinsurance.com diveinsurance.com Lic. # 0757776

RETAILER/RESORT PROFESSIONAL LIABILITY | PROGRAM ROSTER

Legal Business Name

PADI Retail/Resort S-

PADI Retailers and Resorts Professional Liability insurance for renewed PADI Instructors, Assistant Instructors, Divemasters, Swim Instructors, Freediving, and Mermaid Instructors associated with your facility.

You can now include dive pros from other training agencies on your Retail/Resort Professional Liability

Insurance. Non-PADI pros are not to exceed more than 25% of those insured under the Retail/Resort Professional Liability.

Important information:

- You can easily add or remove dive pros as your professional staff changes.
- Higher limits are available.
- There is no limit to the number of individuals who can be added to a retailer/resort's policy.
- Policy limits are \$1,000,000 combined single limit per occurrence (per incident, shared between all the involved dive professionals and the facility) and a \$2,000,000 annual aggregate.
- The coverage for the retailer/resort and individual is subject to all Exclusions and Conditions of the Professional Liability policy.
- The Retail/Resort Instructional policy premium is included with the store/resort's general liability premium.

Follow these steps to sign up your professional staff members:

- 1. Print the members' names and information as indicated below.
- 2. Have each individual member complete an application (#300DT) for the applicable insurance year.
- 3. Ensure members indicate the level of coverage, sign the box and sign Section 1 or 2 (not both).
- 4. Submit the individual applications (#300DT) with this roster.

Member Name	Agency	Member Number	Insurance Level Applied For* (Include Tec credentials for Tec coverage)

*Select insurance level, such as Instructor, Assistant Instructor, or Divemaster. Include Tec credentials for Tec coverage.

Exclusions - see reverse

I hereby declare that I have read, understand and acknowledge the Exclusions printed on the reverse. I also understand that the limits of liability on the certificate of insurance are shared between all staff members.

Print Name

Date

Signature

PRODUCT NO.10265 (Rev.06/22)

EXCLUSIONS READ CAREFULLY BEFORE SIGNING PAGE 1

X) Any claim arising out of any "occurrence" in which the insured knowingly permitted the uncertified student involved in the claim to leave the immediate area during in-water instruction without supervision and the attendance of an instructor or a certified assistant.

Y) Any claim arising out of any "occurrence" in which the insured left or permitted the uncertified student involved in the claim to be unattended during in-water instruction and/or testing.

Z) Any claim arising out of any "occurrence" involving a recreational training or supervisory dive conducted by an insured that is planned for depths greater than 40 meters/130 feet; planned with mandatory stage decompression (safety stops are acceptable); or planned using gas mixes other than compressed air, or enriched air unless all students are previously certified divers or are participating in an open water diver course with an enriched air training option. This exclusion (Z) does not apply to any insured when Technical Diving coverage is indicated on the insured's certificate of insurance.

AA) Any claim arising out of any "occurrence" involving a technical training or supervisory dive conducted by an insured that is planned for depths greater than 100 meters/330 feet; or planned using gas mixes other than compressed air, enriched air, oxygen, or trimix.

BB) Any claim arising out of any "occurrence" in which the insured failed to obtain a medical history form completed by the student involved in the claim, prior to in-water instruction; and in the case of a minor, the failure to have obtained the minor's parent's or guardian's signature on the medical history form. Furthermore, this insurance does not apply if the medical history form indicated any condition contrary to safe participation in diving activities, and the insured failed to require the student to obtain medical approval (based on a medical examination) by a licensed physician, who is not the student, prior to in-water instruction. CC) Any claim arising out of any "occurrence" during a training dive or swim instruction in which the insured had not first obtained from the student involved in the claim a signed release of liability/assumption of risk form developed or approved by the certification organization through which the training was offered; and in the case of a minor, the failure to have obtained the minor's parent's or guardian's signature on the form.

DD) Any claim arising out of any "occurrence" during a technical training dive in which the insured had not first obtained from the student involved in the claim a signed release of liability/assumption of risk form developed or approved by the certification organization through which the technical training was offered, specifically stating that the student acknowledges that the training involves technical dive training.

EE) Any claim arising out of any "occurrence" involving scuba instruction provided by the insured to a student under the age of ten (10), except for courses taught in confined water (e.g. swimming pools), which may be offered to anyone age eight (8) and older.

FF) Any claim arising out of any "occurrence" involving instruction in which the insured instructor and/or Dive Center/Resort Operator has not maintained records for the purpose of recording the progress of the student involved in the claim.

GG) Any claim arising out of any "occurrence" involving instruction in which the insured instructor and/or Dive Center/Resort Operator has not maintained records for the purpose of evaluating the understanding of the instructional material by the student involved in the claim.

HH) Any claim arising out of any "occurrence" involving instruction in which the insured instructor and/or Dive Center/Resort Operator has not retained all records relating to the individual student involved in a claim, for a minimum of five (5) years.

II) Any claim arising out of any "occurrence" involving the insured's conduct of an introductory experience program (any program designed to introduce uncertified divers to recreational scuba diving via a supervised, controlled open water dive experience) that was not in accordance with ISO 11121 Requirements for Introductory Programmes to Scuba Diving. This exclusion does not apply to confined wateronly experiences being conducted by properly certified divemasters, assistant instructors and instructors.

2022 - 2023 PROFESSIONAL LIABILITY

Retailer/Resort Professional Liability EXCLUSIVELY FOR DIVE PROS AFFILIATED WITH PADI RETAILER AND RESORT MEMBERS IN THE UNITED STATES



PLEASE PRINT CLEARLY PADI No.

Name	Initial	Last
Mailing Address		
City	State	
Country	Postal/Zip Code	
Email		
Physical Address		
Phone No. ()		

Select Level of Coverage

- Instructor
- Assistant Instructor
- Divemaster
- Non-teaching/Supervising Instructor†
- Divemaster/Assistant Instructor Assisting Only**
- TecRec endorsement for selection above.*
- Freediver/Mermaid Instructor Only
- EFR Instructor Only
- Swim Instructor Only
- Cylinder Inspection Instructor*

* Submit proof of professional technical diving and/or Cylinder Inspection Instruction certification. ** Divemaster/Assistant Instructor Assisting Only option provides coverage to Divemasters and Assistant Instructors ONLY while assisting insured instructors with classes.

[†] No coverage will be afforded for any Open Water Scuba Instructor who teaches any form of scuba diving or snorkeling during the policy period.

POLICY PERIOD

12 Month policy from initial effective date. **IMPORTANT**: To maintain continuous coverage from 30 June 2022 – completed applications with proper payment must be received at Vicencia & Buckley, a division of HUB International Insurance Services, Inc., AND APPROVED BY THE INSURANCE COMPANY BEFORE 30 June 2022.

Submit your completed and signed application, along with proper payment to Vicencia & Buckley, a Division of HUB International Insurance Services, Inc., You are insured when your application is APPROVED BY THE INSURANCE COMPANY. At that time, you will receive a Certificate of Insurance and PADI will be notified that your coverage is in force.

Brochures and applications are for illustration purposes only and are designed as a general description of the policies. Coverage will be determined by the actual policy language.

SIGN HERE

I hereby declare that I have read, understand, and accept the
Exclusions on reverse.
I understand that coverage purchased under the PADI
Retailer/Resort Instructional Policy may be canceled at the request
of the PADI Retailer or PADI Resort Operator. I also understand that
the limits of liability declared on the certificate of insurance are
shared between all staff members insured under the
Retailer/Resort Instructional Policy, and coverage is afforded only
while involved in the retailer/resort's teaching and supervisory
activities.

Retailer/Resort Name	S-number
Signature of Applicant	Date

Special Important Notice

READ CAREFULLY BEFORE COMPLETING AND SIGNING. YOU COMPLETE ONLY NO. 1 OR NO. 2 – NOT BOTH

Insurance coverage is only provided if the insurance company is put on notice of a possible claim through one of its authorized agents or PADI.

I. , have NO knowledge of an incident, accident, occurrence, or omission that may lead to (or has already led to) a legal action or claim for my supervisory or instructional activities. By applying for this insurance, I hereby authorize PADI to release information to the insurance company pertinent to the investigation of insurance claims. OR Signed Date , have knowledge of an incident, accident, occurrence, or omission I. 2 that may lead to (or has already led to) a legal action or claim for my supervisory or instructional activities. By applying for this insurance, I hereby authorize PADI to release information to the insurance company pertinent to the investigation of insurance claims. Name of Person injured Date of incident Incident report filed: Yes No (Include or tell how to obtain) Serious Injury Yes No In training Yes No **Fatality Yes No** Location of incident Brief summary of situation or possible claim Signed Date

EXCLUSIONS READ CAREFULLY BEFORE SIGNING PAGE 1

X) Any claim arising out of any "occurrence" in which the insured knowingly permitted the uncertified student involved in the claim to leave the immediate area during in-water instruction without supervision and the attendance of an instructor or a certified assistant.

Y) Any claim arising out of any "occurrence" in which the insured left or permitted the uncertified student involved in the claim to be unattended during in-water instruction and/or testing.

Z) Any claim arising out of any "occurrence" involving a recreational training or supervisory dive conducted by an insured that is planned for depths greater than 40 meters/130 feet; planned with mandatory stage decompression (safety stops are acceptable); or planned using gas mixes other than compressed air, or enriched air unless all students are previously certified divers or are participating in an open water diver course with an enriched air training option. This exclusion (Z) does not apply to any insured when Technical Diving coverage is indicated on the insured's certificate of insurance.

AA) Any claim arising out of any "occurrence" involving a technical training or supervisory dive conducted by an insured that is planned for depths greater than 100 meters/330 feet; or planned using gas mixes other than compressed air, enriched air, oxygen, or trimix.

BB) Any claim arising out of any "occurrence" in which the insured failed to obtain a medical history form completed by the student involved in the claim, prior to in-water instruction; and in the case of a minor, the failure to have obtained the minor's parent's or guardian's signature on the medical history form. Furthermore, this insurance does not apply if the medical history form indicated any condition contrary to safe participation in diving activities, and the insured failed to require the student to obtain medical approval (based on a medical examination) by a licensed physician, who is not the student, prior to in-water instruction. CC) Any claim arising out of any "occurrence" during a training dive or swim instruction in which the insured had not first obtained from the student involved in the claim a signed release of liability/assumption of risk form developed or approved by the certification organization through which the training was offered; and in the case of a minor, the failure to have obtained the minor's parent's or guardian's signature on the form.

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