



Tenant Users Liability Insurance Program

TULIP

2014-2015



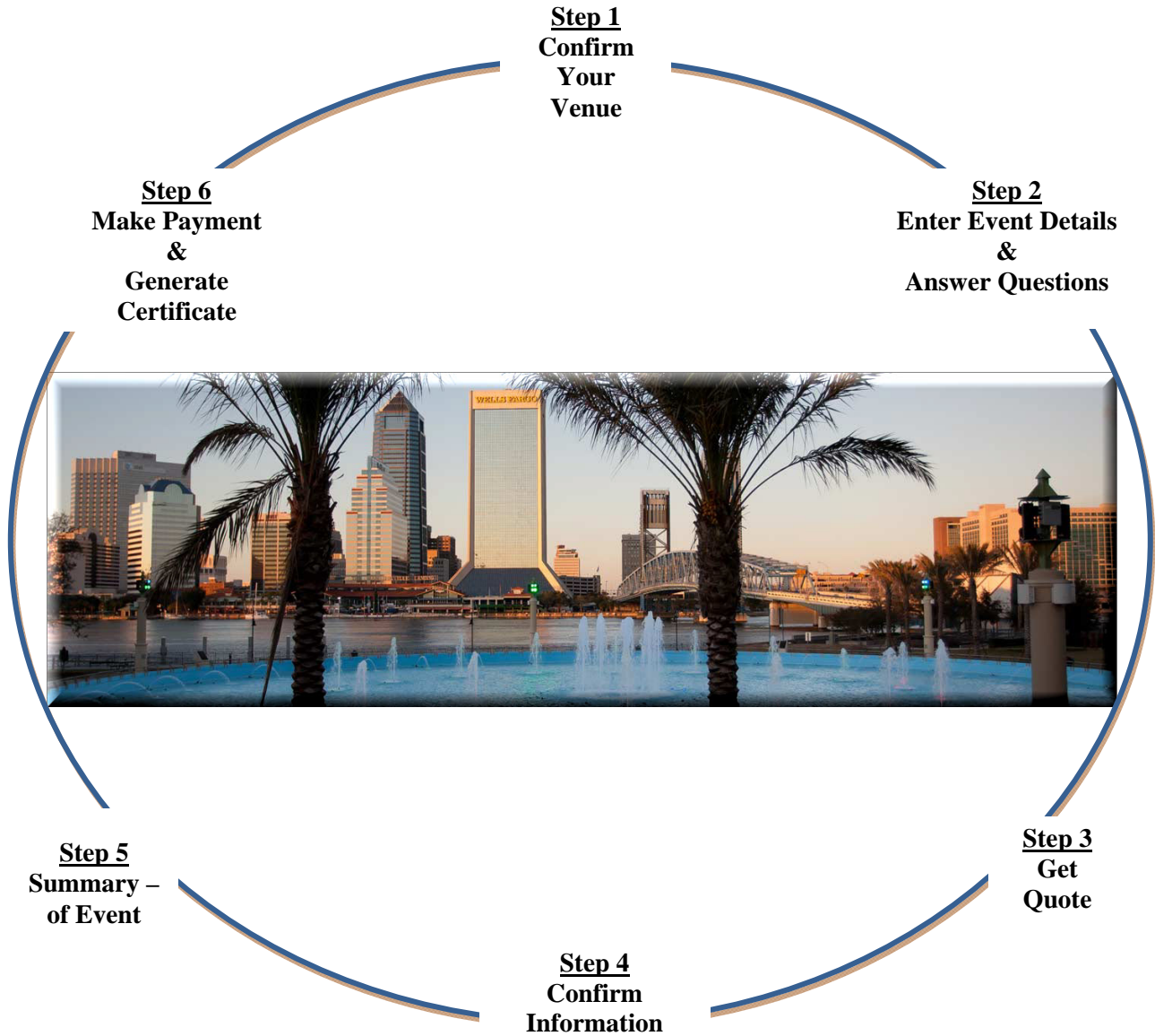
Tenant users can obtain a quote without obligation to purchase by doing the following:

- Visit the TULIP website at www.onebeaconentertainment.com
- Under  TULIP - Event Insurance click on 
- Enter Venue ID code: (or Searchable by name)
- Complete the first three steps of the form to obtain a quote
- If you are ready to purchase just complete the form and pay with a credit card*

Should you require further assistance please call the OneBeacon Entertainment TULIP help desk at [800-507-8414](tel:800-507-8414) Monday through Friday between 8:30 A.M. and 5:30 P.M. *Pacific Time*

**Note: Fully refundable if cancelled prior to the event*

TULIP PROGRAM OVERVIEW



TULIP PROGRAM OVERVIEW

LOG IN:

www.onebeaconentertainment.com



Are You a Producer?

Submit New Business

If you are an existing OneBeacon Entertainment producer, please contact us to submit new business.

Become a Producer

Contact us directly to become a

Welcome

In the entertainment, sports and leisure industries, multi-million dollar decisions are made each day and the insurance requirements are as varied and dynamic as the productions, events and people who seek coverage.

TULIP - Event Insurance

Learn more about a Tenant Users Liability Insurance Policy (TULIP) for your event venue.

[PURCHASE OR QUOTE](#)

STEP 1 – Confirm Venue

TULIP Program

Get a quote or purchase insurance for your event.



800.507.8414

8:30 a.m. - 5 p.m. PT
Monday through Friday

Step 1
Confirm Venue

Step 2
Event Details

Step 3
Get Quote

Step 4
Confirm

Step 5
Summary

Step 6
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Do not use your browser's "Back" button during this process or information you entered may be lost.

1

Confirm Your Venue

All Codes begin with 3911-plus 3 digits unique to venue

Enter your Venue ID Code

3911 -

If you have the Venue ID code you can enter here OR search by City of Jacksonville



Your venue needs to be a participating facility. If your venue did not provide you with a Vendor ID Code, call 1-800-507-8414. You may also try to locate your venue using the search below.

Or search for your Venue:

City of Jacksonville

GO

TULIP PROGRAM OVERVIEW

Or search for your Venue:

The address shown below may be the mailing address for the venue and not the address where the event is being held.

Alberts Field

12073 Brady Road

Jacksonville , FL 32223

After, selecting GO> Field will populate
Verify Venue Details



NEXT ▶

Please Note: For venue's not shown "unnamed locations - various" – please use the City's main code 3911-000 OR select "City of Jacksonville, 117 W. Duval Street, Suite 335"

STEP 2 – Event Details

TULIP PROGRAM OVERVIEW

TULIP Program

Get a quote or purchase insurance for your event.



800.507.8414
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Enter Your Event Details

Select your event from the list of eligible activities below:

Drop-down screen provides eligible event options

Graduations

Any event not listed in the eligible activity list does not qualify for the Tulip program. [View the list of ineligible events.](#)

- Yes No Have you held this event before?
- Yes No If yes, were there any losses or claims?
- Yes No Will there be armed private security at this event?
[Off duty police are not considered armed security.](#)
- Yes No Are you a promoter?
[A promoter is a company in the business of financing or organizing events for profit. One who assumes the financial responsibilities of the event.](#)

After answering the questions
-- another screen will pop up

◀ BACK

TULIP PROGRAM OVERVIEW

Select the date range for your event:

 In your selection, include the days required for setup and take down for the event.

 If your event will extend past midnight, include the following day in your selection.

Select the dates for your event:

July 2014							August 2014						
Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa
29	30	1	2	3	4	5	27	28	29	30	31	1	2
6	7	8	9	10	11	12	3	4	5	6	7	8	9
13	14	15	16	17	18	19	10	11	12	13	14	15	16
20	21	22	23	24	25	26	17	18	19	20	21	22	23
27	28	29	30	31	1	2	24	25	26	27	28	29	30
3	4	5	6	7	8	9	31	1	2	3	4	5	6


* Event name:

Event length:

Yes No * Do you require liquor liability coverage?

[If you are selling liquor at your event, select this coverage. If you are providing...](#)

* Average daily attendance?

 Complete this section only if vendors participating in your event do not carry their own insurance. This coverage offers protection for you should a claim arise as a result of the vendor's negligence.

How many concessionaires will sell food products?

How many concessionaires will sell non-food products?

How many exhibitors that **do not** sell products or services?

How many attractions will be there, including performers?

TULIP PROGRAM OVERVIEW

STEP 3 – Get Your Quote

TULIP Program

Get a quote or purchase insurance for your event.



800.507.8414
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3 Premium Quote and Contact Information

Your estimated premium is: **\$\$\$**.00

Any changes made to your event after the premium has been quoted could change the premium and will need to be quoted.

Enter the tenant user information:

The renter of the facility is: a company
 an individual

* Company name:

* Address 1:

Address 2:

* City:

* State:

* Zip / Postal Code:

Country:

TULIP PROGRAM OVERVIEW

Enter a contact for the insurance policy:

* First name:

* Last name:

* Phone:

example: 123-456-7890

* Email:

example: name@company.com

Check here if address same as above.

Address 1:

Address 2:

* City:

* State: ▼

* Zip / Postal

Code:

Country: ▼

◀ BACK

NEXT ▶



TULIP PROGRAM OVERVIEW

STEP 4 – Confirm Information

TULIP Program

Get a quote or purchase insurance for your event.



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4 Review and Confirm Information

Facility:

Venue ID Code: 3911 - 004
Facility Name: Alberts Field
Address 1: 12073 Brady Road
Address 2:
City: Jacksonville
State: FL
Zip: 32223

Event Details:

Event Type: Graduations
Event Name: 2014 Graduations - example
Dates: 8/7/2014 8/8/2014
Length in Days: 2
Event held prior: no
Armed private security at this event: no
Average Daily Attendance: 50
Number of concessionaires that will sell food products or services: 0
Number of concessionaires that will sell non-food products or services: 0
Number of exhibitors that do not sell products or services: 1
Number of attractions, including performers: 0
Liquor liability coverage: no

Insured:

Insured Name: ABC Company
Address 1: 123 Example Street
Address 2:
City: Jacksonville
State: FL
Zip / Postal Code: 32216
Country: US

Contact:

First Name: Albert
Last Name: Wise
Phone: 904-456-7890
Email: name@abccompany.com
Address 1: 123 Example Street
Address 2:
City: Jacksonville
State: FL
Zip / Postal Code: 32216
Country: US

TULIP PROGRAM OVERVIEW

Agree & Accept:

- I agree that the above information is correct to the best of my knowledge.
- I have reviewed the insurance contract and refund policy posted below:

◀ BACK **COMPLETE** ▶


[Refund Policy](#) | [Cancel Your Insurance](#) | [View Insurance Contract](#)

 Need Assistance?
800.507.8414

STEP 5 – Summary

TULIP Program

Get a quote or purchase insurance for your event.

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5 Summary





Coverage:	General Aggregate:	None
	Products / Completed Operations:	\$1,000,000
	Personal / Advertising Injury:	\$1,000,000
	Each Occurrence:	\$1,000,000
	Fire Damage:	\$50,000

Premium:	Event Premium:	\$75.00
	Liquor Liability:	\$0.00
	Attractions / Performers Premium:	\$0.00
	Exhibitors - Non Sales Premium:	\$90.00
	Concessionaires - Non Food Premium:	\$0.00
	Concessionaires - Food Premium:	\$0.00
	Third Party Party Property Damage:	\$0.00
	Excess Limit Premium:	\$0.00
	State Taxes & Fees:	\$2.00
	TRIA (Terrorism Risk Insurance Act) Premium:	\$1.00
	Total Premium:	\$\$\$\$

◀ START OVER **PURCHASE COVERAGE** ▶ 

TULIP PROGRAM OVERVIEW

Step 6 – Make Payment

Payment Details	
Total Amount	\$ \$\$\$\$
All fields in bold are required.	
<input type="radio"/> Credit Card	
   	
Credit Card Type	Visa <input type="text"/>
Credit Card Number	<input type="text"/>
Card Verification Number	<input type="text"/> What's this?
Expiration Date	<input type="text"/> <input type="text"/>
<input type="radio"/> Check	
Account Number	<input type="text"/> What's this?
Routing Number	<input type="text"/>
Account Type	Checking <input type="text"/>
Check Number	<input type="text"/>
Driver's License / State	<input type="text"/>
Date of Birth	<input type="text"/> - <input type="text"/> - <input type="text"/> (yyyy-mm-dd)
By entering my account number above and clicking Authorize, I authorize my payment to be processed as an electronic funds transfer or draft drawn from my account. If the payment is returned unpaid, I authorize you or your service provider to collect the payment and my state's return item fee by electronic funds transfer(s) or draft(s) drawn from my account. Click here to view your state's returned item fee . If this payment is from a corporate account, I make these authorizations as an authorized corporate representative and agree that the entity will be bound by the NACHA operating rules.	
Authorize	<input type="checkbox"/>
Billing Information	
First/Last Name	Albert <input type="text"/> Wise <input type="text"/>
Company	<input type="text"/>
Street Address 1	123 Example Street
Street Address 2	<input type="text"/>
City/State/Postal Code	Jacksonville <input type="text"/> FL <input type="text"/> 32216 <input type="text"/>
Country	United States <input type="text"/>
Phone Number	<input type="text"/>
Email Address	<input type="text"/>
Policy Number	58816
Producer Code	null
<input type="button" value="Submit Payment"/>	

Attention

Please note that payment processing may take a few moments to complete. Do not click your browser's Back button or try to close or refresh the screen during this time as it may negatively impact your transaction.

Please wait until you receive a confirmation that your payment was processed successfully. If you do not receive a confirmation within 45 seconds please contact Customer Service at (800) 507-8414.

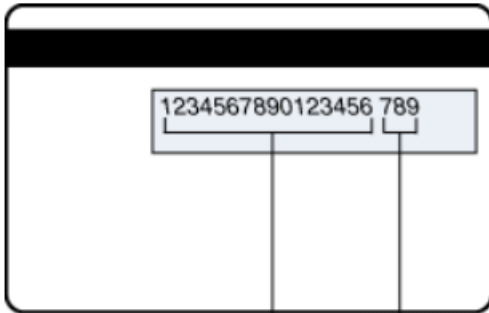
Please use the information that appears on your credit card statement. Incomplete or incorrect information may result in a delay or cancellation of your order.

Card Verification Number

This code is a three- or four-digit number printed on the back or front of credit cards. This number ensures that your customer has physical possession of the card at the time of the order.

Visa	Card Verification Value (CVV2)	Back of the card: if present, 3 digits in the signature area to the right of the credit card number
MasterCard	Card Verification Code (CVC2)	Back of the card: if present, 3 digits in the signature area to the right of the credit card number
American Express	Card Identification Number (CID)	Front of the card: 4 digits on the right above the card number
Discover	Card Identification Number (CID)	Back of the card: if present, 3 digits in the signature area to the right of the credit card number
Diners Club	Card Identification Value (CVV)	Back of the card: 3 digits in the signature area
JCB	Card Identification Number (CVN)	Front of the card: 4 digits on the left below the card number

Sample card verification number for Visa, MasterCard, Discover, and Diners Club:



FINAL

Once submitted successfully – a certificate will be automatically generated to print, email and a copy will be emailed to the designated contacts for The City of Jacksonville