



CITY OF BEAUMONT  
 550 E. 6th Street  
 Phone (951) 769-8520  
 BeaumontCa.gov

**SPECIAL EVENT PERMIT APPLICATION - CITY OF BEAUMONT**

**APPLICANT** (Organization Conducting Event)  
 ORGANIZATION: Beaumont Rugby Club  
 ADDRESS: 175 Pinewood Ct. CITY/STATE: Calimesa / CA ZIP: 92320  
 TEL: (951) 765-7891 FAX: ( ) EMAIL: wpendley@yahoo.com

YES NO  
  Is this a non-profit organization? If yes, provide tax identification number  
  Can members of the general public join this organization?

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**EVENT CONTACTS**  
 PRIMARY'S NAME: Bill Pendley EMAIL: wpendley@yahoo.com  
 ADDRESS: 175 Pinewood Ct. CITY/STATE: Calimesa / CA ZIP: 92320  
 DAY TEL: (951) 765-7891 ALTERNATE TEL: ( ) FAX: \_\_\_\_\_  
 ALTERNATE CONTACT: \_\_\_\_\_ EMAIL: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 DAY TEL: ( ) ALTERNATE TEL: ( ) FAX: \_\_\_\_\_

**FOR THE OFFICE OF CULTURAL AFFAIRS COORDINATED EVENTS ONLY:**  
 Website: \_\_\_\_\_  
 Public Information Contact Name: \_\_\_\_\_ Public Information Contact Phone#: ( )

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**GENERAL EVENT INFORMATION**  
 EVENT NAME: Beaumont Annual Rugby Festival  
 TYPE: (Parade, Festival, Run, Ceremony, ect.): Festival  
 LOCATION: Check and complete all applicable lines  
 On the Downtown Parade Route (STREET)  
 In the Downtown Festival Site (STREET)  
 In a City park..... Name of Park(s): Sports Park  
 On a Paseo or Plaza..... Name of Paseo or Plaza(s): \_\_\_\_\_  
 On a City street..... Name of street(s): \_\_\_\_\_  
 On private property..... Event location address: \_\_\_\_\_  
 Assessor's parcel number(s) of event location: \_\_\_\_\_

**BEGIN SETUP:** Date: \_\_\_\_\_ Time of Day: \_\_\_\_\_ am/pm Indicate when you will take possession of the event site to begin event setup

ACTUAL EVENT DAY/DATE(S):	TIME OF DAY:	Est. Daily Attendance
<u>6/21/25</u>	(Start) <u>7</u> am/pm (End) <u>6</u> am/pm	<u>200+</u>
_____	(Start) _____ am/pm (End) _____ am/pm	_____
_____	(Start) _____ am/pm (End) _____ am/pm	_____

Number of attendees by age: Youth (under 18): 20 Adult: 180+ Total attendance: 200+  
 Number of attendees present during the most crowded period of event: 200+

**FINAL CLEANUP:** Date: 6/21/25 Time of Day: 7 am/pm Indicate when the event site will be completely cleaned & reopened for normal use

City Office Use Only:

**SPECIAL EVENT PERMIT APPLICATION - CITY OF BEAUMONT**

**EVENT DESCRIPTION**

YES	NO	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Was this event held last year? If yes, where <u>Sports Park</u> Attendance? <u>200+</u>
<input type="checkbox"/>	<input type="checkbox"/>	Is this a Charitable fundraiser? If yes, for what cause? _____
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is there an attendance fee? Fee per person: \$ _____ Fee collected in advance? _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Is this event open to the public?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Will there be any areas within the event that will be for private use only? (Example: VIP area, etc..)

**MANDATORY ATTACHMENTS:** Required to be submitted with every application. Reference page ii for instructions.

**EVENT NARRATIVE:** Please provide a description of the event theme, purpose, schedule of activities, entertainment, food, beverages (including alcohol), cleanup plan, etc..

**SITE DIAGRAM:** For activities on **public and private property:** a detailed drawing depicting the proposed layout, including the location of booths, tables, stages, fences, dumpsters, signage, portable toilets and all other event equipment. For any activity on **private property:** diagram must also show **all** marked parking spaces, adjacent streets, residential units, and indicate the linear feet from the event boundary to streets and residences.

**ROUTE MAP:** For parades, runs, walks, and races on **public streets or sidewalks:** a map of the proposed route, route, start and finish points, direction of movement and proposed street closures including the specific lane(s) requiring closure.

**SPECIFIC EVENT INFORMATION**

YES	NO	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Will <u>any</u> equipment be used on the event site? (Examples: fence, <del>tent, canopy, table, chair</del> , stage, <del>trash container, dumpster, booth, amplified sound system</del> , musical instruments, carnival ride, parade float, portable toilet, etc..)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Will the event require the closure of any public street or traffic lane?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Will there be any food and/or beverages prepared, sold, or served at the event?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Will there be sales of any kind?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Will there be any activity connected to the event? (Examples: live animal display, parachute jump).
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Do you require any City services? (Examples: traffic control, tow zone, street barricades, electrical power, etc..)

If you answered **NO** to all of the questions in this section, you have completed this application. Sign the Declaration below, attach the Mandatory Site Diagram or Route Map and submit your application.

If you answered **YES** to **ANY** of the questions in this section, please complete the remainder of this application.

**DECLARATION**

As the authorized representative of the applicant, I hereby declare that:

- The information contained in this application and attachment(s) is true, complete and to the best of my knowledge.
- Applicant agrees to defend, indemnify and hold harmless City, its officers, agents and employees from and against any and all claims, demands, causes of action, or liabilities incurred by City, its officers, agents, or employees, arising from Applicant's acts or omissions under this Agreement or any act of omission of the Applicant's permission or invitation of Applicant, except as may arise from the negligence or willful misconduct of City, its officers, agents, contractors, or employees. In any action or claim against City in which Applicant is defending City, City shall have the right to approve legal counsel providing City's defense and such approval shall not be reasonably withheld.
- Applicant has received and understands the information contained in the Special Events Guidelines and will adhere to required arrangements listed within these Guidelines.
- Applicant will pay for actual costs of any City services provided for your event within 30 days from receipt of City invoice.
- No copyrighted musical or visual arts composition shall be performed or played, weather amplified, televised, in the form of a mechanical recording or personal rendition, or otherwise in connection with any use of City property, unless the Applicant shall have first obtained all approvals and paid any license fee or other fee required by the copyright owner. Without limitation of any other provision, Applicant's indemnification of City as set forth in a permit or authorization to conduct an event, shall include indemnifying and saving City harmless from and against any and all liability or responsibility whatsoever for any infringement of an/or other violation of the right of any such copyright owner under any copyright law.
- Applicant will provide access to the City's Special Event recycling service provider at a level of service established by the Director of Environmental Services or his/her designee if the following conditions are met: the event occurs on a City street or on a City-owned site, facility or public park and has an average daily attendance of at least 1,000 persons.

Signature William Pendley Date 4/28/25  
 Print Name William Pendley Title Coach  
 Business Name Beaumont Rugby Club Tel (951) 765-7891 Email wpendley@yahoo.com

**For Private Property Event,** a letter from the property owner (or an agent authorized by the owner) must be included with this application. The letter should be on company letterhead acknowledging their approval of the event, knowledge of the date, time and activities scheduled to take place. Contact information (address, email and phone) for this individual should be included in the letter.

**SPECIAL EVENT PERMIT APPLICATION - CITY OF BEAUMONT**

<b>ADDITIONAL EVENT INFORMATION</b>	
<b>Equipment / Source of Power</b>	
<b>YES</b>	<b>No</b>
1. _____	<input checked="" type="checkbox"/> Will the event be fenced? ..... Do you want the City to provide fencing? YES: _____ NO: _____
2. _____	<input checked="" type="checkbox"/> Will there be parade floats?
3. _____	<input checked="" type="checkbox"/> Will there be a tent or canopy? ..... If yes, date being erected: _____ Size(s): _____
4. <input checked="" type="checkbox"/>	Will amplified sound equipment be used?
5. _____	<input checked="" type="checkbox"/> Will electrical power be used. Do you want the City to provide electrical power? Yes: _____ NO: _____
6. _____	<input checked="" type="checkbox"/> Will a generator be used?
7. _____	<input checked="" type="checkbox"/> Will there be a stage? ..... If yes, date being set up: _____ Removal date: _____
8. _____	<input checked="" type="checkbox"/> Will heaters be used? ..... If yes, indicate heater type: _____
9. _____	<input checked="" type="checkbox"/> Will there be booths? ..... If yes, complete the following information: # of sales booths: <u>1-3</u> # of non-sales booths: _____ Total booths: <u>1-3</u> Booth setup date: <u>6/21/25</u> Setup time: <u>0800</u> Booth removal date: <u>6/21/25</u> Removal time: <u>7 pm</u> Vendor arrival date: <u>6/21/25</u> Arrival: <u>0800</u>
10. Total tables that will be set up (outside of booths): <u>0</u>	
<b>Food and Beverage</b>	
<b>YES</b>	<b>NO</b>
11. <input checked="" type="checkbox"/>	_____ Will alcohol be sold or served? ..... If yes, Beer? <input checked="" type="checkbox"/> Wine? <input checked="" type="checkbox"/> Other? _____
12. <input checked="" type="checkbox"/>	_____ Will there be food preparation?
13. <input checked="" type="checkbox"/>	_____ Will there be cooking booths?
14. Indicate all cooking methods: Electrical appliance: _____ <input checked="" type="checkbox"/> Liquid fuel device: _____ <input checked="" type="checkbox"/> Wood/Charcoal BBQ: _____ Deep Fryer: _____	
<b>Sales</b>	
<b>YES</b>	<b>NO</b>
15. <input checked="" type="checkbox"/>	_____ Will any items be sold?
16. _____	<input checked="" type="checkbox"/> Will vehicles be sold?
17. _____	<input checked="" type="checkbox"/> Are you requesting a Vendor Zone? <b>Applicable to Downtown events only</b> - this controls vendor carts around your event.
<b>Traffic and Parking Control</b>	
<b>YES</b>	<b>NO</b>
18. _____	<input checked="" type="checkbox"/> Will you require a "No Parking" tow zone?
19. _____	<input checked="" type="checkbox"/> Will you require a traffic control officer?
20. _____	<input checked="" type="checkbox"/> Are you requesting that any public street or traffic lane be closed for your event?
<b>Miscellaneous Activities</b>	
<b>YES</b>	<b>NO</b>
21. _____	<input checked="" type="checkbox"/> Will there be a circus or carnival?
22. _____	<input checked="" type="checkbox"/> Will there be fireworks/pyrotechnics?
23. _____	<input checked="" type="checkbox"/> Will there be aircraft or a parachute jump?
24. _____	<input checked="" type="checkbox"/> Will there be live animals?
25. _____	<input checked="" type="checkbox"/> Will there be items that produce extra trash/litter ((flyers, box lunches, etc..)? Describe: _____
26. _____	<input checked="" type="checkbox"/> Will there be any other type of activity not listed here? Describe: _____
Additional information describing above responses: _____ _____ _____ _____ _____ _____	

## **Special Events Insurance Requirements**

Special events can include a variety of situations including but not limited to the use of City space for parties and other events or events occurring at the local parks.

### **REQUIREMENTS:**

The Special Event Sponsor shall procure and maintain for the duration of the event insurance against claims for injuries to persons or damages to property which may arise from or in connection with the Special Event Sponsor's operation and use of the premises. The cost of such insurance shall be borne by the Special Event Sponsor.

#### *Minimum scope of insurance*

Coverage shall be at least as broad as:

1. Insurance Services Office Commercial General Liability coverage.
2. Workers' Compensation insurance as required by the State of California and Employers' Liability insurance (for Special Events Sponsors with Employees).
3. Property insurance against all risks of loss to any tenant improvements or betterments if any.

#### *Minimum Limits of Insurance:*

Special Events Sponsor shall maintain limits no less than:

1. General Liability: \$1,000,000 per occurrence per bodily injury, personal injury and property damage. If Commercial General Liability Insurance or other from with a general aggregate limit is used, either the general aggregate limit shall apply separately to this project/location or the general aggregate limit shall be twice the required occurrence limit.
2. Workers' Compensation as required by the State of California.
3. Employers' Liability: \$1,000,000 each accident. \$1,000,000 policy limit bodily injury by disease, \$1,000,000 each employee bodily injury by disease.
4. Property Insurance: Full replacement cost with no coinsurance penalty provision.

#### *Deductible and Self-Insured Retentions:*

Any deductible or self-insured must be declared to and approved by the City. At the option of the City, either: the insurer shall reduce or eliminate such deductions or self-insured retentions or respect the City, its officers, officials, employees, and volunteer; or the Special Events Sponsors shall provide a financial guarantee satisfactory to the City guaranteeing payment of losses and related investigations, claim administration and defense expenses.

#### *Other Insurance Provisions:*

1. The City of Beaumont, its officers, officials, employees, and volunteers are to be covered as insured with respect to liability arising out of ownership, maintenance, or use of that part of the premises leased to the Special Events Sponsor.

2.The Special Events Sponsor's insurance coverage shall be primary insurance as respects the City of Beaumont, its officers, officials, employees, and volunteers. Any insurance or self-insurance maintained by the City, its officers, officials, employees, or volunteers shall be excess of the Special Events Sponsor's insurance and shall not contribute with it.

3.Each insurance policy required by this clause shall be endorsed to state that coverage shall not be canceled, except after thirty (30) days prior written notice has been provided to the City.

*Acceptability of Insurer:*

Insurance is to be placed with insurer with a current A.M. Best's rating of no less than A: VII, Unless otherwise acceptable to the City. Exception may be made for the State Compensation Insurance Fund when not specifically rated.

*Verification of Coverage:*

Special Events Sponsor shall furnish the City with endorsements effecting coverage required by this clause.

The endorsements are to be signed by a person authorized by that Insurer to bind coverage on its behalf. All endorsements are to be received and approved by the City before the special events permit becomes effective. However, failure to do so shall not operate as a waiver of these insurance requirements. As an alternative to the City's forms, the Special Events Sponsor's insurer may provide completed copies of all required insurance policies, including endorsements affecting the coverage required by these specifications. Coverage shall be equal to that provided to the first named insured. Any limitations on coverage application only to the City shall not be acceptable.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/17/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> USI Insurance Services NW 601 Union Street, Suite 1000 Seattle, WA 98101	<b>CONTACT NAME:</b> Heidi Palmer
	<b>PHONE (A/C No, Ext):</b> 206-577-5985 <b>FAX (A/C, No):</b>
	<b>E-MAIL ADDRESS:</b> Heidi.Palmer@usi.com
	<b>INSURER(S) AFFORDING COVERAGE</b>
	<b>INSURER A:</b> Everest National Insurance Company <b>NAIC #</b> 10120
	<b>INSURER B:</b>
	<b>INSURER C:</b>
	<b>INSURER D:</b>
	<b>INSURER E:</b>
	<b>INSURER F:</b>

**INSURED**  
 United States of America Rugby Football Union Ltd  
 DBA: USA Rugby  
 501 S Cherry St #100  
 Denver CO 80246

**COVERAGES**      **CERTIFICATE NUMBER:** 82753864      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Sexual Abuse & Molestation <input checked="" type="checkbox"/> Participant Legal Liability GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	SI8ML02306241	8/1/2024	8/1/2025	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$3,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 General Aggr Limit \$20,000,000
A	<input type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			SI8ML02306241 Coverage for USA Rugby Employees Only	8/1/2024	8/1/2025	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED      RETENTION \$	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	SI8EX01715241	8/1/2024	8/1/2025	EACH OCCURRENCE \$4,000,000 AGGREGATE \$8,000,000 \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE      OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**

This certificate is issued on behalf of USA Rugby & Beaumont Rugby. The certificate holder is an additional insured, but only with respect to liability arising out of the named insured's activities or operations. Coverage applies to all club practices and games. Coverage does not apply to any tournament unless tournament is sanctioned and pre-approved by USA Rugby. Participants Legal Liability/Sexual Abuse & Molestation coverage is included in the general liability.

<b>CERTIFICATE HOLDER</b> City of Beaumont 550 East 6h St. Beaumont CA 92223	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	<b>AUTHORIZED REPRESENTATIVE</b> Gary Patterson

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**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## ADDITIONAL INSURED – MANAGERS OR LESSORS OF PREMISES

### COMMERCIAL GENERAL LIABILITY COVERAGE PART

This endorsement modifies insurance provided under the following:

#### SCHEDULE

**Designation Of Premises (Part Leased To You):**

City of Beaumont  
550 East 6th St.  
Beaumont CA 92223

**Name Of Person(s) Or Organization(s) (Additional Insured):**

PER SCHEDULE ON FILE WITH COMPANY

**Additional Premium: INCL.**

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

**A. Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by you or those acting on your behalf in connection with the ownership, maintenance or use of that part of the premises leased to you and shown in the Schedule and subject to the following additional exclusions:

This insurance does not apply to:

1. Any "occurrence" which takes place after you cease to be a tenant in that premises.
2. Structural alterations, new construction or demolition operations performed by or on behalf of the person(s) or organization(s) shown in the Schedule.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and

2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

**B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable limits of insurance; whichever is less.

This endorsement shall not increase the applicable limits of insurance.

SI8ML02306241

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## GENERAL LIABILITY ENHANCEMENT ENDORSEMENT

This endorsement modifies insurance provided under the following:

### COMMERCIAL GENERAL LIABILITY COVERAGE FORM

The following is a summary of the Limits of Insurance and additional coverage provided by this endorsement. For complete details on specific coverage, please refer to policy language in this endorsement and the underlying Commercial General Liability Coverage Form.

Coverage Applicable	Enhancement
Non-Owned Watercraft	Less Than 50 Feet
Supplementary Payments – Bail Bonds	\$1,000
Supplementary Payments – Loss Of Earnings	\$500 per day
Newly Acquired Organizations – Extended Coverage	180 days
Subsidiaries As Insureds	Included
Fire Damage To Premises Rented To You	\$500,000
Notice To Company – Duties In The Event Of Occurrence, Claim Or Suit	Broadened
Unintentional Failure To Disclose Hazards	Broadened
Waiver Of Subrogation	Broadened
Amendment to Bodily Injury Definition	Broadened

#### A. Non-Owned Watercraft

Paragraph g.(2) under Paragraph 2. Exclusions of Section I – Coverage A Bodily Injury And Property Damage Liability is replaced by the following:

- (2) A watercraft you do not own that is:
- (a) Less than 50 feet long; and
  - (b) Not being used to carry persons or property for a charge;

#### B. Supplementary Payments – Increased Limits

Paragraphs 1.b. and 1.d. under Supplementary Payments – Coverages A And B of Section I – Coverages are replaced by the following:

- b. Up to \$1000 for cost of bail bonds required because of accidents or traffic law violations arising out of the use of any vehicle to which the Bodily Injury Liability Coverage applies. We do not have to furnish these bonds.
- d. All reasonable expenses incurred by the insured at our request to assist us in the investigation or defense of the claim or "suit", including actual loss of earnings up to \$500 a day because of time off from work.

#### C. Newly Acquired Organizations – Extended Coverage

Paragraph 3.a. under Section II – Who Is An Insured is replaced by the following:

- a. Coverage under this provision is afforded only until the 180th day after you acquire or form the organization or the end of the policy period, whichever is earlier;

#### D. Subsidiaries As Insureds

The following is added to Section II – Who Is An Insured:

- 4. Any subsidiary company in which you own a financial interest of more than 50% as of the effective date of this endorsement is included as a Named Insured. However, such organization is not a Named Insured:
  - a. If it is a partnership, joint venture or limited liability company;
  - b. If there is other similar insurance available to it;



- c. If there is other similar insurance that would be available to it, but for the termination of the insurance or the exhaustion of its limits of insurance; or
- d. After you cease to own a financial interest of more than 50%.

**E. Fire Damage To Premises Rented To You – Increased Limits**

Paragraph 6. under **Section III – Limits of Insurance** is replaced by the following:

- 6. Subject to Paragraph 5. above, the most we will pay under Coverage A for damages because of “property damage” to any one premises while rented to you or temporarily occupied by you with permission of the owner is the greater of:
  - a. \$500,000; or
  - b. The Damage To Premises Rented To You Limit shown in the Declarations.

**F. Notice To Company**

The following is added to Condition 2. **Duties In The Event Of Occurrence, Offense, Claim Or Suit** under **Section IV – Commercial General Liability Conditions**:

- e. Your failure to first notify us of a claim will not invalidate coverage under this policy if the loss was inadvertently reported to another insurer. However, you must report any such “occurrence” to us within a reasonable time once you become aware of such error.

**G. Unintentional Failure To Disclose Hazards**

Condition 6. **Representations** under **Section IV – Commercial General Liability Conditions** is replaced by the following:

**6. Representations**

By accepting this policy, you agree:

- a. The statements in the Declarations are accurate and complete;
- b. Those statements are based upon representations you made to us; and
- c. We have issued this policy in reliance upon your representations.

Any unintentional error or omission in the description of, or failure to completely describe, any premises or operations you intend to be covered by this Coverage Part, will not invalidate or affect coverage for those premises or operations. However, you must report any such error or omission to us as soon as reasonably possible after its discovery.

**H. Waiver Of Subrogation**

The following is added to Condition 8. **Transfer Of Rights Of Recovery Against Others To Us** of **Section IV – Commercial General Liability Conditions**:

We waive any right of recovery we may have against any person or organization because of payments we make for injury or damage arising out of your operations or “your work” done under a written agreement that requires you to waive your rights of recovery. The written agreement must be made prior to the date of the “occurrence”.

**I. Amendment to Bodily Injury Definition**

Paragraph 3. Of **Section V. – Definitions** is replaced by the following:

- 3. “Bodily injury” means bodily injury, sickness, mental injury, mental anguish, shock or fright sustained by a person, including death resulting from any of these at any time. However, “bodily injury” does not include injury arising out of the offenses designated in the definition of “personal and advertising injury”.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **AMENDMENT – OTHER INSURANCE (PRIMARY NONCONTRIBUTORY)**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

**A. Paragraph a. Primary Insurance of 4. Other Insurance of SECTION IV COMMERCIAL GENERAL LIABILITY CONDITIONS is replaced by the following:**

**a. Primary Insurance**

This insurance is primary except when b. below applies. If this insurance is primary, our obligations are not affected unless any of the other insurance is also primary. Then, we will share with all that other insurance by the method described in c. below, except that we will not seek contribution from any party with whom you have agreed in a written contract or agreement that this insurance will be primary and noncontributory, if the written contract or agreement was made prior to the subject "occurrence" or offense.

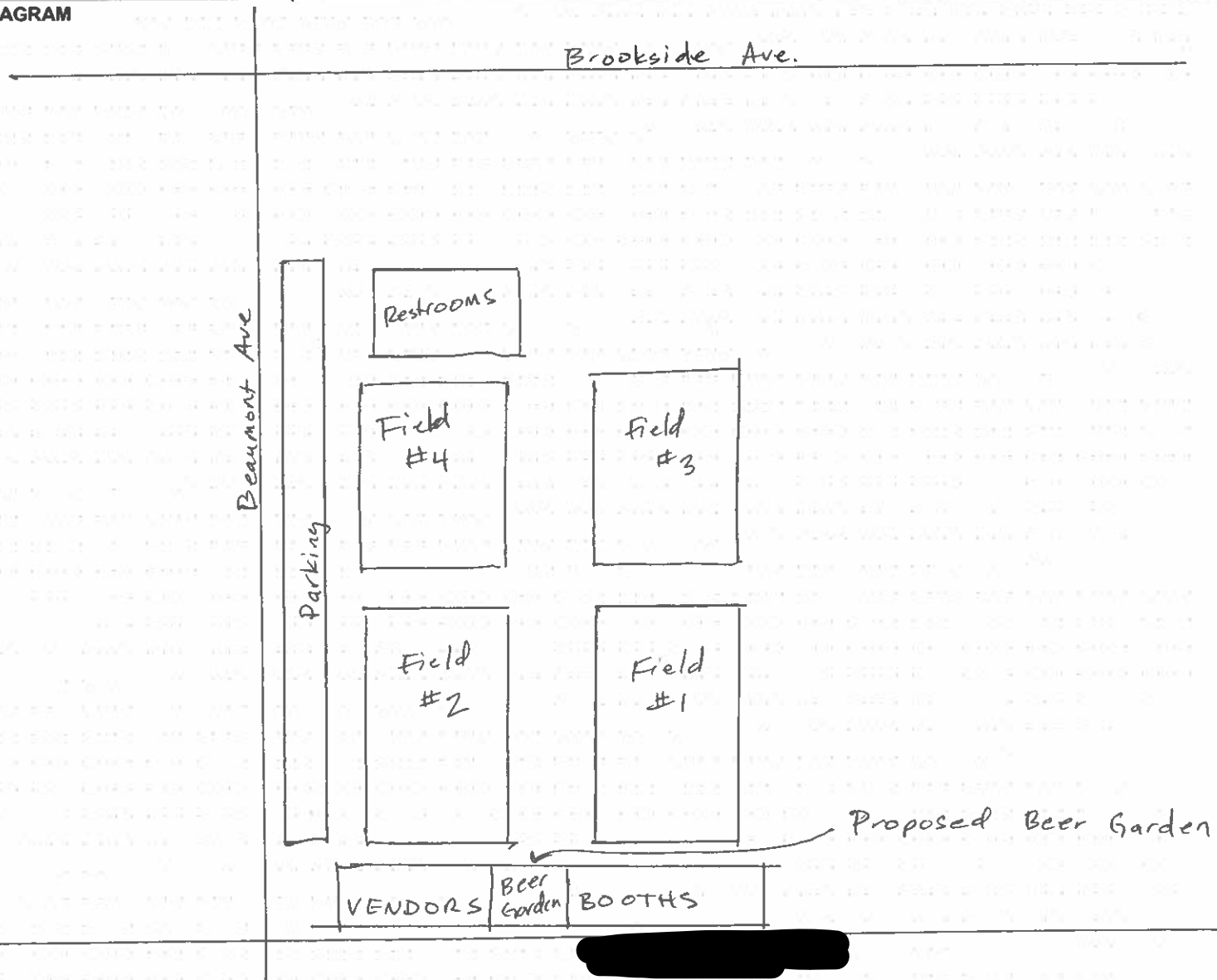
### SUPPLEMENTAL DIAGRAM

#### Instructions to Applicant:

Draw a sketch of the area on which the licensed premises is or will be located. Show adjacent structures and nearest cross streets. *If this is an event for a daily license, catering authorization, event authorization or miscellaneous use, show the area where sales and consumption of alcoholic beverages will occur. Post a copy of this diagram with Daily License, Catering Authorization or Event Authorization where the event is held. Sales and consumption of alcoholic beverages must be confined to the area designated in the diagram and supervised to prevent violations of the Alcoholic Beverage Control Act.*

1. APPLICANT NAME (Last, first, middle) <i>Beaumont Rugby Club</i>	2. LICENSE TYPE <i>ABC-221</i>
3. PREMISES ADDRESS (Street number and name, city, zip code) <i>1692 Beaumont Ave, Beaumont CA 92223</i>	4. NEAREST CROSS STREET <i>Brookside Ave</i>

#### DIAGRAM



I have read the above instructions and I declare under penalty of perjury that the above diagram is true and correct.

APPLICANT SIGNATURE <i>Neil Pandy</i>	DATE SIGNED <i>4.28.25</i>
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#### FOR ABC USE ONLY

CERTIFIED CORRECT (Signature)	PRINTED NAME	INSPECTION DATE
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To whom it may concern:

The Beaumont Annual Rugby Festival is a rugby-based sporting event that has been held annually in the city of Beaumont for over 15 years now. The event consists of many rugby matches played by teams from all over Southern California, Arizona, and Nevada. There is typically men's and women's brackets and occasionally high school brackets. We also have an assortment of food vendors, t-shirt/clothing booths and a beer garden. The games continue throughout the day and culminate in a final match for each of the brackets. We honor the top teams with trophies at the end of the day. Then the hosting local team (Beaumont Rugby) cleans up.

Thank you.

Bill Pendley