

Minimum Insurance Requirements for National Park Service

The following table shows the minimum amounts and types of insurance required. Proof of insurance is generally in the form of a certificate of insurance. The National Park Service does not make recommendations on insurance companies.

Activity	Type of Insurance	Minimum Amount Required
Backpacking, Hiking, Photography, Horse Rides, Horse Packing, Camping (Group), Dog Sled Tours, Winter Backcountry Use, Sportfishing without boat, Bicycle Tours, Bear Viewing, Wagon Rides	<u>Comprehensive General Liability</u> (Guides & Outfitters)	\$300,000/Occurrence
Mountaineering	<u>Comprehensive General Liability</u> (Guides & Outfitters)	<u>PARTY SIZE - Amount</u> Up to 5: \$300,000/Occurrence 6 to 12: \$500,000/Occurrence 13 or more: \$1,000,000/Occurrence
Motor Vehicles (Shuttle Service, Vehicle Tours)	<u>Auto Liability</u> Coverage is required for all owned, non-owned and hired vehicles.	<u>PARTY SIZE - Amount</u> Up to 5: \$300,000/Occurrence 6 to 12: \$500,000/Occurrence 13 to 20: \$750,000/Occurrence 21 to 50: \$1,500,000/occurrence 51 or more: Contact NPS
<u>Watercraft Over 26 Feet</u> Boating Trips, Charter Boat, Sportfishing with boat, Hunt Transporters (via boat)	<u>Protection & Indemnity</u> If your vessels is over 26 feet.	<u>Passengers Amount</u> Up to 5: \$300,000/Occurrence 6 to 12: \$500,000/Occurrence 13 to 20: \$1,000,000/Occurrence 21 to 50: \$1,500,000/occurrence 51 & Over: Contact NPS
<u>Watercraft Under 26 Feet</u> Boating Trips, Charter Boat, Sportfishing with boat, Kayak Tours, Hunt Transporters (via boat)	<u>Comprehensive General Liability</u> If your vessels is under 26 feet. (Insurance cert must include statement that " <u>watercraft liability is included</u> ".	\$300,000 Per Occurrence
Air Taxi, Big Game Transporters (via plane)	Aircraft Liability	\$150,000 per seat for bodily injury or death in a single occurrence; and \$100,000 for property damage in a single occurrence.
Employee Coverage	Worker's Compensation	Required if you have Hired Employees.

NOTE:

If you are looking for information on insurance companies in Alaska, please visit the Alaska Division of Insurance's website or contact them directly at either office location below:

<http://www.commerce.state.ak.us/insurance/apps/producersearch/InsLicStart.cfm>

Anchorage Office

Robert B. Atwood Building
550 W. 7th Avenue, Suite 1560, Anchorage, Alaska 99501-3567
(907) 269-7900 Fax (907) 269-7910 TDD (907) 465-5437

Juneau Office

9th Floor State Office Bldg., 333 Willoughby Avenue 99801
PO Box 110805, Juneau, Alaska 99811-0805
(907) 465-2515 Fax (907) 465-3422 TDD (907) 465-5437

Additional Insurance Requirements for National Park Service :

1. An insurance certificates must show that coverage has been provided for all of your activities. For example, if you were an Air Taxi Operator who will also Guide clients, you would need both Aircraft Liability and General Liability Insurance (Guides & Outfitters Insurance). Separate insurance certificates are not required.
2. All insurers must be admitted (licensed) in the state in which the Holder is domiciled.
3. The following must be shown on the Certificate of Insurance:

- The Certificate Holder’s address is: (mail to this address or fax to 907-644-3813)
US Government
National Park Service- Concessions
240 West 5th Avenue #114
Anchorage, AK 99501
- The A.M. Best Identification Number of the Insurance Company must be on certificate
- The Insured’s name but the same as that under which you will be doing business.
- The US Government is a named additional insured and is annotated as such on the certificate.

4. **Visitor Acknowledgement of Risks Form**

- The CUA Holder **may require** guests/clients participating in activities authorized under this CUA to sign a Visitor Acknowledgement of Risks form.
- The CUA Holder **may NOT request or require** guests/clients participating in activities to sign a liability **waiver** form, insurance disclaimer and/or indemnification (hold-harmless) agreement.
- The CUA Holder will submit to the Concessions Program Manager for approval, its “proposed” Visitor Acknowledgement of Risks form, if any, within 60 days of the effective date of this CUA and at least 30 days in advance of any proposed changes in the form. The Concession Program Manager is located at National Park Service, Concessions, 240 West 5th Avenue #114, Anchorage, AK 99501. If no Visitor Acknowledgement of Risks form will be used, the CUA Holder will advise the Concession Program Manager of this intention within 60 days of the effective date of this CUA.
- A sample, service-approved Visitor Acknowledgement of Risks form is attached.

Sample Acknowledgement of Risk Form
VISITOR'S ACKNOWLEDGEMENT OF RISKS

In consideration of the services of _____,

Doing Business As _____,
their officers, agents, employees, and stockholders, and all other persons or entities associated with those businesses (hereafter collectively referred to as "_____"), I agree as follows:

Although _____ has taken reasonable steps to provide me with appropriate equipment and skilled guides so I can enjoy an activity for which I may not be skilled, _____ has informed me this activity is not without risk. Certain risks are inherent in each activity and cannot be eliminated without destroying the unique character of the activity. These inherent risks are some of the same elements that contribute to the unique character of this activity and can be the cause of loss or damage to my equipment, or accidental injury, illness, or in extreme cases, permanent trauma or death. _____ does not want to frighten me or reduce my enthusiasm for this activity, but believes it is important for me to know in advance what to expect and to be informed of the inherent risks. The following describes some, but not all, of those risks.

I am aware that (*Description of activity*): _____ entails risks of injury or death to any participant. I understand the description of these inherent risks is not complete and that other unknown or unanticipated inherent risks may result in injury or death. I agree to assume and accept full responsibility for the inherent risks identified herein and those inherent risks not specifically identified. My participation in this activity is purely voluntary; no one is forcing me to participate, and I elect to participate in spite of and with full knowledge of the inherent risks.

I acknowledge that engaging in this activity may require a degree of skill and knowledge different from other activities and that I have responsibilities as a participant. I acknowledge that the staff of _____ has been available to more fully explain to me the nature and physical demands of this activity and the inherent risks, hazards, and dangers associated with this activity.

I certify that I am fully capable of participating in this activity. Therefore, I assume and accept full responsibility for myself, including all minor children in my care, custody, and control, for bodily injury, death, or loss of personal property and expenses as a result of those inherent risks and dangers identified herein and those inherent risks and dangers not specifically identified, and as a result of my negligence in participating in this activity.

I have carefully read, clearly understood, and accepted the terms and conditions stated herein and acknowledge that this agreement shall be effective and binding upon me, my heirs, assigns, personal representative, and estate and for all members of my family, including minor children.

Signature Printed Name Date

Address, City, State, Zip Phone Date

Signature of Parent of Guardian, if participant is under 18 years of age

Signature Printed Name Date

Phone