WISCONSIN COUNTY MUTUAL INSURANCE COMPANY
TENANT-USER LIABILITY INSURANCE PROGRAM

APPLICATION FORM

Name of County: Rusk County

Mailing Address: 311 Miner Ave E, Suite S140 Ladysmith, WI 54848

Contact Person: Charmaine Riddle Phone #: 715-532-2151

PLEASE COMPLETE THE FOLLOWING INFORMATION FOR EACH ADDITIONAL INSURED AND EVENT TO BE ENDORSED ONTO THE COUNTY'S LIABILITY POLICY.

1. NAME OF TENANT-USER:_____
2. EMAIL: _____
3. MAILING ADDRESS: _____

   CITY, STATE & ZIP:_____
4. CONTACT PERSON:_____ PHONE #_____
5. LOCATION OF EVENT: _____
6. DESCRIPTION OF EVENT: _____
7. DATE OF EVENT: _____

   USING THE ATTACHED ENDORSEMENT RATE SCHEDULE, COMPLETE THE FOLLOWING:
8. ESTIMATED ATTENDANCE: _____
9. PREMIUM CHARGE – PER EVENT/PER DAY: $_____
10. TOTAL PREMIUM PAID: $ _____

In order to secure coverage, the completed application and premium payment, payable to; **WISCONSIN COUNTY MUTUAL**, must be received by Aegis LLC at least 3 days prior to the date of the event:

RETURN APPLICATION ALONG WITH PAYMENT TO:
Charmaine Riddle
311 Miner Ave E, Suite S140
Ladysmith, WI 54848

MAKE CHECK OUT TO WISCONSIN COUNTY MUTUAL