



## EVENT REQUEST FORM

The submission of this form does not guarantee approval of event. Event is subject to marketing and property management approval.

Send request to: [azalea@primestor.com](mailto:azalea@primestor.com)

### REQUEST BY:

Tenant/ Company:

Name:

Title:

Phone:

Email:

Today's Date:

Event Date:

Event Time:

### SUMMARY OF EVENT

Please include a description and purpose of the event.

### SET-UP & BREAKDOWN

Set-Up Days:

Break Down Days:

Set-Up Time:

Break-Down Time

### POINT OF CONTACT

*Primary*

*Secondary*

Name:

Name:

Phone

Phone:

Email:

Email:

DOCUMENT CONTINUED



## EVENT REQUEST FORM

### COI REQUIREMENTS ( CERTIFICATE OF INSURANCE)

**Please read thoroughly**

Do you have a current COI?

Can you provide a COI?

**Note:**

- COI **MUST** meet all requirements (coverage limits and details listed below).
- COI must be provided for **EVERY** participating vendor/exhibitor.

**CERTIFICATE HOLDER AND ADDITIONALLY INSURED VERBIAGE MUST MATCH REQUIREMENTS. (SEE COI REQUIREMENTS)**

Contact us for questions.

Participating Vendors/ Exhibitors/ Partners:

Approximate No. of staff on-site:

Do you have a Run of Show/ Timeline?

**If so, please attach to this form**

Additional Needs/ Requests/ Comments:

**Please list any needs on property (trash bins, blocked/ barricaded parking, access to electrical, lighting, reserved parking, security, porters, water, gates, overnight details, etc.)**

**DESIRED LOCATION**

**Please highlight and list details of the desired location for event (please use site map/ aerials to detail set-up proposal)**



Notes (Please use this to highlight the proposed area for the event along with set-up details – canopies, barricades, traffic flow, etc. Be as thorough as possible.)



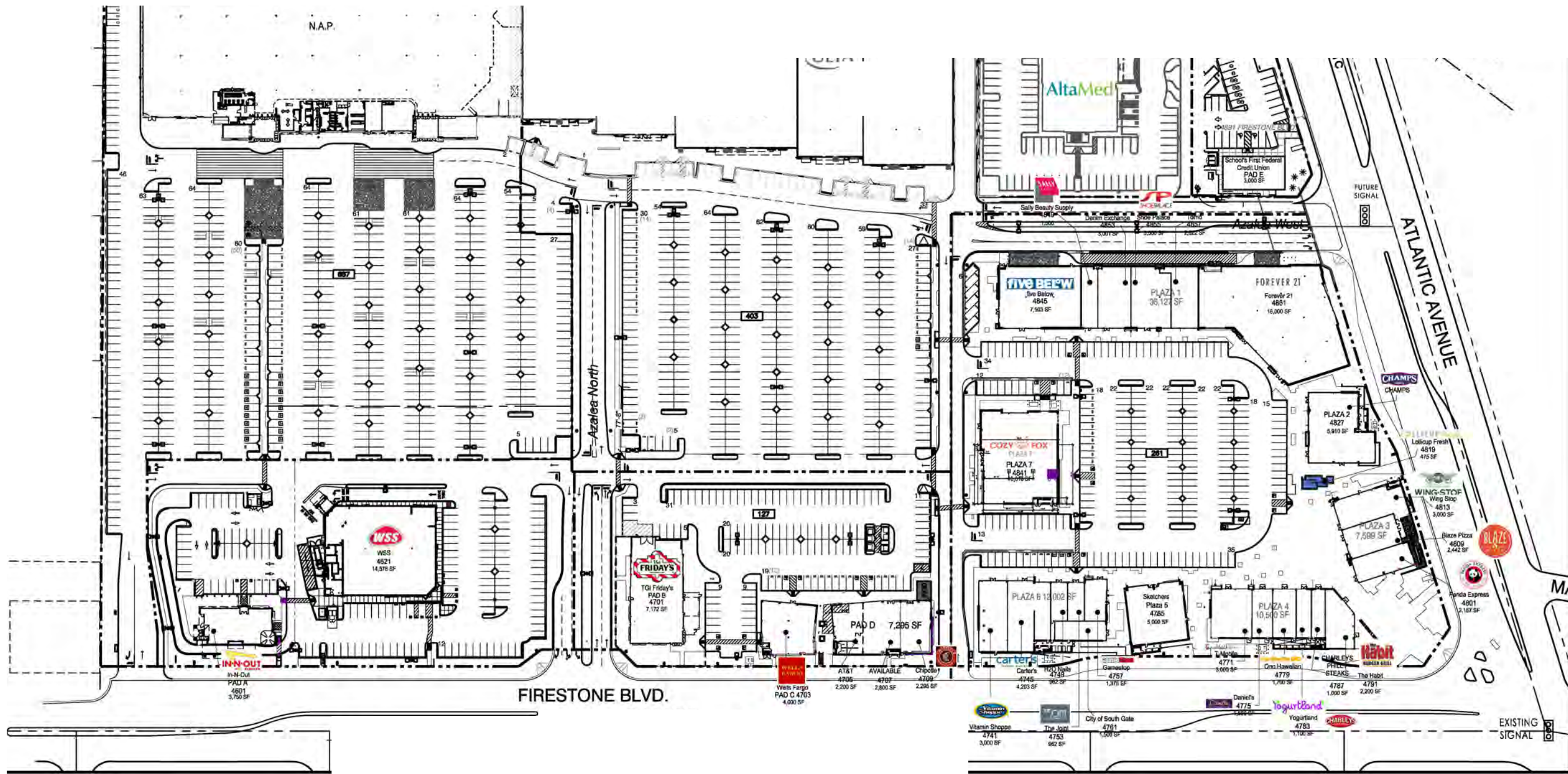


Notes (Please use this to highlight the proposed area for the event along with set-up details – canopies, barricades, traffic flow, etc. Be as thorough as possible.):





azalea  
 azalea JOINT  
 VENTURE, LLC 4635  
 FIRESTONE BLVD.  
 SOUTH GATE CA  
 90280



## LOGO SITE PLAN

Notes (Please use this to highlight the proposed area for the event along with set-up details – canopies, barricades, traffic flow, etc. Be as thorough as possible.)







## VENDOR Insurance Requirements

This document provides our general insurance requirements and serves as **information only**.

Contractor, prior to commencement of any Work anticipated hereunder, shall provide Owner, for itself and all subcontractors, with Certificates of Insurance evidencing the existence of insurance issued by carriers, in amounts and on forms acceptable to Owner naming Owner(s) and Agent as additional insured. Insurance shall be written as outlined, and for limits not less than the following:

### I. Certificate Holder Title

**Azalea Joint Venture, LLC**

**Primestor Development, LLC.**

**Federal Realty Investment Trust**

Additional Insured Endorsement/Waiver of Subrogation Language:

“Azalea Joint Venture, LLC; Primestor Development, LLC.; Federal Realty Investment Trust and all entities controlling, controlled by, or under common control with such entity, together with its respective owners, shareholders, partners, members, divisions, officers, directors, employees, representatives and agents, and its successors and assigns.”

### II. Certificate Holder Address

Azalea Joint Venture, LLC

Primestor Development, LLC.

Federal Realty Investment Trust

9950 Jefferson Blvd. Building 2

Culver City, CA. 90232

### III. Required Coverage and Limits

**General Liability:** \$2,000,000 (or larger as required by project), or current limited carried, whichever is greater, on a per occurrence basis.

- Policy must include a separate **Additional Insured Endorsement** (see language requirements above).
- **Endorsement** must indicate that it is **Primary and Non-Contributory** to any coverage available to “Azalea Joint Venture, LLC; Primestor Development, LLC; Federal Realty Investment Trust”
- The endorsement must include the **policy number** and be **signed by an authorized representative** of the insurance company.

**Workers' Compensation:** Statutory limits set forth by the State of California (If no employees, please provide a statement as such on company stationery).

- Policy must include a separate **Waiver of Subrogation Endorsement** (see language above).
- The endorsement must include the policy number and be signed by an authorized representative of the insurance company.

#### Auto Liability:

- \$1,000,000, including owned, non-owned, hired and scheduled autos.
- Uninsured and Underinsured Motorist coverage must be included.

**Property Insurance:**

- Evidence of perils referred in lease agreement and in an amount equal to not less than 90% of the actual replacement cost.

**IV. Other Provisions**

- Coverage must name the Lessee, all subsidiaries and/or dba's covered by the certificated provided.
- Show complete insurance carrier names and NAIC number as listed in A.M. Best Property & Casualty Guide.
- Policy number(s) and expiration date(s) must be listed on the certificate and all endorsements.
- Coverage must be placed with insurance companies authorized to do business in the State of California and with a Best's policy holder rating of not less than A- and financial rating of not less than VIII.
- A minimum 30-day notice is required for cancellation of coverage.
- Binders are accepted for 30 days.
- Policy must provide at least 30 days notice of cancellation.
- Certificate and documents must be completed in their entirety and signed by authorized representative.
- **ADDITIONAL PROVISION MAY APPLY TO COMPLY WITH THE REQUIREMENTS OF THE APPLICABLE LEASE.**

**V. Note to Underwriter**

If the Endorsements cannot be provided immediately, please send a memo stating that they will follow