



CITY OF LONG BEACH

DEPARTMENT OF DEPARTMENT OF PARKS, RECREATION AND MARINE

2760 Studebaker Road • Long Beach, CA 90815 • (562) 570-3100 • FAX (562) 570-3154

BUSINESS OPERATIONS

FITNESS PROVIDER APPLICATION

1. Name of Organization: _____

Contact Person: _____

Business address: _____

City: _____ Zip Code: _____

Phone numbers: Office: _____ other: _____

Fax: _____ E-mail: _____

2. Is the firm a Disadvantaged, Minority or Woman-Owned Business Enterprise? If so, is it certified?

DBE/WBE/MBE?

- DBE
- MBE
- WBE

Certified?

- Yes
- No

3. Indicate the structure of the firm and complete the appropriate section below:

- Individual Partnership/Company/Association Corporation

INDIVIDUAL:

Doing Business As: _____

PARTNERSHIP:

Names and addresses of partners/owners:

1. _____

2. _____

CORPORATION:

Date and place of incorporation: _____

Name (s) and address (es) of officers:

1. _____

2. _____

4. Please provide the following:

- A brief business history, including the size of the organization and years in business.
- Desired Park/Beach location(s): _____
- Copy of current City of Long Beach business license. For info on obtaining this, call (562) 570-6211
- Certificates of Insurance as follows:
 - Commercial General Liability insurance (equivalent in scope to ISO form CG 00 01 11 85 or CG 00 01 11 88 including products and at least \$50,000 fire legal liability) in an amount not less than \$1 million per occurrence and \$2 million general aggregate. An Additional Insured Endorsement must be provided on a separate form equivalent in coverage scope to ISO form CG 20 12 11 85 covering the City of Long Beach, its officials employees and agents as additional insured parties on the policy.
 - Evidence of Worker's Compensation Insurance as required by the California Labor Code and employer's liability insurance in an amount not less than \$1 million.
 - Evidence of Automobile Liability Coverage covering Auto Symbol 1 (Any Auto) in an amount not less than \$500,000 combined single limit per accident.
 - All Risk Property Insurance.
 - An example of a current participant liability waiver (If applicable).
- List of services
- List of fees/prices
- Copies of brochures and/or other promotional materials (if applicable)
- Documentation showing the legal structure of the firm (if applicable):
 - Fictitious name statement
 - Articles of Incorporation
 - By-laws

I declare that the foregoing is true and correct. I understand that any false statement on this application or incomplete information will be sufficient grounds for denying me a permit.

Signature: _____

Date: _____

5. Please submit this application and the required to:

City of Long Beach
Department of Parks, Recreation and Marine
Attn: Contract Management Division
2760 Studebaker Road
Long Beach, CA 90815-1697

*Attach additional sheets if necessary