

Liquor Liability Supplement Application

Does Applicant Have a Valid Liquor License? Yes No

Name on Liquor License _____

License #: _____ Licensing Authority: _____

Average Age of Patrons 20s 30s 40s 50+

Number of alcohol servers employed _____

Establishment's Latest Hour of Operation _____

(Check all that Apply)

ENTERTAINMENT DEVICES / LIVE ENTERTAINMENT

- | | |
|---|--|
| <input type="checkbox"/> Pool Tables _____ | <input type="checkbox"/> Rock/Velcro Wall |
| <input type="checkbox"/> Video Games _____ | <input type="checkbox"/> Trampoline/Inflatable Bouncing Area |
| <input type="checkbox"/> Dart Boards _____ | <input type="checkbox"/> Gyroscope |
| <input type="checkbox"/> Mechanical Devices/Bull Riding | <input type="checkbox"/> Bungee Jumping |
| <input type="checkbox"/> Pyrotechnics | <input type="checkbox"/> Foam/Bubble Machines |
| <input type="checkbox"/> Other Describe _____ | |
| <input type="checkbox"/> Disc Jockey | <input type="checkbox"/> Karaoke |
| <input type="checkbox"/> Live Bands | <input type="checkbox"/> Boxing/Wrestling |
| <input type="checkbox"/> Dance Floor | <input type="checkbox"/> Pay-Per-View Events |
| <input type="checkbox"/> Other Live Performers Describe _____ | |
| <input type="checkbox"/> Customer Contests Describe _____ | |

Frequency of Live Entertainment _____ Times per Week

PROMOTIONS / SPECIALS :

- | | |
|--|---|
| <input type="checkbox"/> "Happy Hour"/Reduced-Price Drink Events | <input type="checkbox"/> Waitstaff with Shots |
| <input type="checkbox"/> Flat-Fee "Open Bar" or "All-You-Can-Drink" Events | <input type="checkbox"/> Beer Tubs |
| <input type="checkbox"/> Drink Incentives ("2 for 1," Larger Servings, or "Comps") | <input type="checkbox"/> Funnel Drinking |
| <input type="checkbox"/> Other, Describe _____ | |

Frequency of Promotions _____ Times per Week

- | | | |
|---|------------------------------|-----------------------------|
| Does Establishment have a service bar only? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Establishment serve beer and wine only? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are <u>all</u> alcohol servers certified in a formal alcohol training course? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Is Establishment within city, town or village limits? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Establishment have a drive-through facility? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Is there a college/university within a one-mile radius? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Establishment permit "bring-your-own-bottle" or set-ups? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Establishment permit patrons under 21 years old in a bar area after 10 pm? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Applicant ever sell or serve alcohol away from the premises above? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If Yes, describe _____

Within the past five (5) years, has liquor liability coverage been declined, cancelled or non-renewed?

Yes No

Within the past five (5) years, has Applicant been cited for any violation of law relating to the sale of alcohol, or had its liquor license suspended or revoked?

Yes No

If Yes to either question above, describe further (include dates, circumstances, and preventive measures taken)

Describe precautions taken to prevent serving minors and intoxicated patrons:

Describe how you and your employees handle patrons who become intoxicated:

Expiring liquor liability carrier: _____

Expiring policy period: From _____ To _____

Expiring policy limits: \$ _____ Deductible \$ _____

Expiring premium: \$ _____

List all claims and suits brought against Applicant within the past five (5) years which allegedly arose from an alcohol-related incident(s):

Date of Loss	Description	Amount Paid	Amount Reserved	Status O= Open C=Closed
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____