ANDERSON INSURANCE BROKERS, INC. 1831 E. Roosevelt Road Wheaton, IL 60187 Phone: 630 681 8000 Fax: 630 681 0000

Bar/Restaurant Product Application – All States

YOU CAN OBTAIN A QUOTE BY PROVIDING THE INFORMATION IN SECTION I - INSTANT QUOTE BELOW, SUBJECT TO THE REMAINDER PROVIDED PRIOR TO BINDING.

I. INSTANT QUOTE INFORMATION
Instant Quote is only available for accounts with no losses in the past 3 years. If there is loss history, please complete the entire application.
Applicant's Name:
Location Address:
City:
State:
Zip:
Description of Operations:

Do you own the Building? D Yes D No (If No, skip Building Owner Questions under both the Property & Liability Sections below)
How many years has the applicant been at the current location?
Property Section

Construction:	🖵 Frame	Joisted	Masonry	Non-Combus	stible	Masonry Non-Combustible
	🛛 Modifi	ed Fire-Resi	stive	Fire-Resistive	Э	Other
Protection Class:						
Requested Cause of	f Loss:	Basic	Special	al		
Requested Valuation	ר:	Replac	ement Cos	t 🛛 Actual Cas	sh Value	
Deductible:		🛛 \$1,000	□ \$2,500) 🛛 \$5,000		
Coinsurance:		□ 80%	90%	1 00%		
Business Personal F	Property Lin	nit \$				
Business Income &	Extra Expe	nse Limit \$ _				
Is there commercial	cooking on	the premise	es?		Yes	🖵 No
What type of extingu	ishing syst	em is functio	oning and c	perational?	Wet	🖵 Dry
Is there a deep fat fr	yer on the	premises?			🖵 Yes	□ No
Building Owner						
Building Lin	nit \$					
		ding constru				
What is the	square foo	tage of the e	entire struct	ture?	sq. ft.	

Is the	e building fully p	protected by an	operational sprinl	der system covering	100% of the premises	? 🛛 Yes	🛛 No
General Liability Se	ction						

Food Sales		Alcohol Sales	Other Rece	eipts	Total Annu	al Receipts
\$		\$	\$		\$	
	Limit:	,	❑\$1,000,000/\$2, 	000,000		
		en's Club or is adult/exotic danci			Yes	🗖 No
	Is there a dance floor?				Yes	🗖 No
	Are there tables?				Yes	🗖 No
	If yes, is there table se	rvice?			Yes	🗖 No
	Does the applicant hire or u				Yes	🗖 No
	What is the latest hour of o	peration?				
	Is alcohol served after	12:00 midnight?			Yes	🗖 No
	In the past three years, hav Building Owner	ve there been any previous claim	ns involving assault a	and/or batte	ery? 🛛 Yes	🗖 No
	Is any portion of th	e building leased to commercial	tenants?	🗖 No	If Yes, applicab	le sq. ft
	Does the applicant	lease any apartments at this lo	cation?	No applical	If Yes, Number ble sq. ft.	

Additional Interests (AI = Additional Insured, LP = Loss Payee, M = Mortgagee)

Name	Relationship/Interest	Address	City, State, Zip	AI	LP	М

If you desire a Liquor Liability Quote, please complete Section IV Eligibility Criteria, Liquor Liability section of this application.

If you own the building and it is older than 10 years old, please complete the following: Heating Updated (yr) Age of roof yrs. Plumbing updated (yr) Electrical Updated (yr) Heating Updated (yr) Roof Type: FIRI Wood Shake Shingle Metal Tile Slate Pumbing Type: PIRI Wood Shake Central Station Local gong None What type of burglar alarm is on the premises? Central Station Local gong None V. ELIGIBILITY CRITERIA No bankruptcies, tax or credit liens against the applicant in the last 5 years True False 2. No tax liens or back taxes owed on the property Coverage has not been cancelled or non-renewed in the last 3 years (not applicable in Missouri) True False Property I. For any building built prior to 1978, 100% of the electric wiring is on functioning and operational fire extinguishers available N/A True False 3. All cooking equipment has an in-force cleaning contract I'rue False True False 4. Business does not operation all free extinguishers available I'rue False True False 6. Functioning and operational fire extinguishers available I'rue False I'rue	II LOSS INFORMATION FOR THE PAST 3 YEARS Property Coverages Incurred Year Status Incurred Open/Closed \$ Open/Closed \$ Open/Closed \$	Description	
Open/Closed \$ If you own the building and it is older than 10 years old, please complete the following: Age of roofyrs. Prumbing updated (yr) Roof Type: Flat Wood Shake Shingle Metal Tile Slate Other	Year Status Incurred Open/Closed \$		
III. ADDITIONAL PROPERTY INFORMATION If you own the building and it is older than 10 years old, please complete the following: Heating Updated (yr) Heating Updated (yr) Age of roof yrs. Plumbing updated (yr) Electrical Updated (yr) Heating Updated (yr) Moot Type: LP PVC Copper Lead Galvanized Other What type of burgler alarm is on the premises? Contral Station Local gong None V. ELICIBILITY CRITERIA In No bankruptices, tax or cradit lines against the applicant in the last 3 years (not applicable in Missouri) True False 2. No tax liens or back taxes owed on the property Property For any building built prior to 1978, 100% of the electric wiring is on functioning and operational is mokers? NA True False 4. Al cooking equipment has an in-force cleaning contract True False False 5. Functioning and operational is moke and/or heat detectors in all units and/or occupancies True False 6. Functioning and operational is moke and or heat detectors in all units and/or occupancies True False 6. Al cooking equipment has an in-force deaning ontract True False 1. Applicant heat ont be legal's allowable time frames True False 6. Functioning and o			
Age of roofyrs. Plumbing updated (yr) Electrical Updated (yr) Heating Updated (yr) Plumbing Type: PVC Copper Lead Galvanized Other What type of burglar alarm is on the premises? Central Station Local gong None N. ELIGIBLITY CRITERIA Intel states owed on the property Local gong None False 1. No bankruptices, tax or credit liens against the applicant in the last 3 years (not applicable in Missouri) True False 1. For any building built prior to 1978, 100% of the electric wiring is on functioning and operating circuit breakers I''''''''''''''''''''''''''''''''''''	III. ADDITIONAL PROPERTY INFORMATION		
Roof Type: Image: Image: Metal Image: Image: Other Plumbing Type: PVC Copper Lead Galvanized Other What type of burglar alarm is on the premises? Image:			
Plumbing Type: PVC Copper Lead Galvanized Other What type of burglar aiam is on the premises? Central Station Local gong None N. ELICIBILITY CRITERIA True False 1. No bark upotes, tax or credit liens against the applicant in the last 5 years True False 2. No tax liens or back taxes owed on the property True False 3. Coverage has not been cancelled or non-renewed in the last 3 years (not applicable in Missouri) True False 7. For any building built prior to 1978, 100% of the electric wiring is on functioning and operating circuit breakers NA True False 3. All cooking equipment has an in-force cleaning contract True False True False 4. Business does not operate on a seasonal basis True False Free any building built prior to 1978, there is no aluminum wiring or knob & tube wiring NA True False 5. For any building built prior to 1978, there is no aluminum wiring or knob & tube wiring NA True False 6. Functioning and operational fire extinguishers available True False True False 6. Functioning and operational smoke and/or heat detectors in all units and/or occupancies True <td></td> <td></td> <td></td>			
What type of burglar alarm is on the premises? Central Station Local gong None N. No bankruptcies: tax or credit liens against the applicant in the last 5 years True False 2. No tax lines or back taxes owed on the property True False 3. Coverage has not been cancelled or non-renewed in the last 3 years (not applicable in Missouri) True False Property Total cancelled or non-renewed in the last 3 years (not applicable in Missouri) True False Property Total cancelled or non-renewed in the last 3 years (not applicable in Missouri) True False Property Total cancelled or non-renewed in the last 3 years (not applicable in Missouri) NA True False 2. For any building built prior to 1978, there is no aluminum wiring or knob & tube wiring NA True False 3. All cocking equipment thas an in-force cleaning contract True False False Functioning and operational fre extinguishers available True False 6. Functioning and operational smoke and/or heat detectors In the palse True False 3. All acokin served with functioning and operational smoke/heat detectors True False 4. Applicant is the only occupancy in the building or all deep fat frying applian			
W. ELICIBILITY CRITERIA In the back taxes owed on the property In the last 3 years (not applicable in Missouri) In the last 3 years (not applicable in Missouri) In the last 3 years (not applicable in Missouri) In the last 3 years (not applicable in Missouri) In the last 3 years (not applicable in Missouri) In the last 3 years (not applicable in Missouri) In the last 3 years (not applicable in Missouri) In the last 3 years (not applicable in Missouri) In the last 3 years (not applicable in Missouri) In the last 3 years (not applicable in Missouri) In the last 3 years (not applicable in Missouri) In the last 3 years (not applicable in Missouri) In the last 3 years (not applicable in Missouri) In the last 3 wears (not applicable in Missouri) In the last 3 wears (not applicable in Missouri) In the last 3 wears (not applicable in Missouri) In the last 3 wears (not applicable in Missouri) In the last 3 wears (not applicable in Missouri) In the last 3 wears (not applicable in Missouri) In the last 3 wears (not applicable in Missouri) In the last 3 wears (not applicable in Missouri) In the last 3 wears (not applicable in Missouri) In the last 3 wears (not applicable in Missouri) In the last 3 wears (not applicable in Missouri) In the last 3 wears (not applicable in Missouri) In the last 3 wears (not applicable in Missouri) In the last 3 wears (not applicable in Missouri) In the last 3 wears (not applicable in Missouri) In the last 3 wears (not applicable in Missouri) In the last 3 wears (not applicable in Missouri) In			
2. No tax liens or back taxes owed on the property □ True □ False 3. Coverage has not been cancelled or non-renewed in the last 3 years (not applicable in Missouri) □ True □ False 1. For any building built prior to 1978, 100% of the electric wiring is on functioning and operating circuit breakers □ N/A □ True □ False 2. For any building built prior to 1978, there is no aluminum wiring or knob & tube wiring □ N/A □ True □ False 3. All cooking equipment has an in-force cleaning contract □ True □ False □ True □ False 5. Functioning and operational smoke and/or heat detectors in all units and/or occupancies □ True □ False 6. Functioning and operational smoke and/or heat detectors in all units and/or occupancies □ True □ False 7. All alcohol served within the legally allowable time frames □ True □ False 3. All alcohol served within the legally allowable time frames □ True □ False 6. No exposure to pyrotechnic displays, foam machines, moon bounces, trampolines, roke walls or swimming pools □ True □ False 7. No exposure to mechanical bull or mechanical riding devices □ True □ False □ True □ False 8. Not stuated on a vessel □ Patese □ True □ False □ N	IV. ELIGIBILITY CRITERIA		
3. Coverage has not been cancelled or non-renewed in the last 3 years (not applicable in Missouri) □ True □ False Property 1. For any building built prior to 1978, 100% of the electric wiring is on functioning and operating clicuit breakers □ N/A □ True □ False 2. For any building duilt prior to 1978, there is no aluminum wiring or knob & tube wiring □ N/A □ True □ False 3. All cocking equipment has an in-force cleaning contract □ True □ False 4. Business does not operate on a seasonal basis □ True □ False 5. Functioning and operational fire extinguishers available □ True □ False 6. Functioning and operational smoke and/or heat detectors in all units and/or occupancies □ True □ False 7. Applicant has not, is not and will not act as a Franchisor (Grantor of a Franchise) □ True □ False 7. All public areas are equipped with functioning and operational smoke/heat detectors □ True □ False 8. All alcohol served within the leagly allowable time frames □ True □ False 7. No exposure to pyrotechnic displays, foam machines, moon bounces, trampolines, rock walls or swimming pools □ True □ False 7. No exposure to mechanical bull or mechanical iding devices □ True □ False 9. Pat			
If False_advise reason			
Property 1. For any building built prior to 1978, 100% of the electric wiring is on functioning and operating circuit breakers In ViA I True False 2. For any building built prior to 1978, there is no aluminum wiring or knob & tube wiring N/A I'rue False 3. All cooking equipment has an in-force cleaning contract I'rue False Functioning and operational free extinguishers available I'rue False 6. Functioning and operational free extinguishers available I'rue False Functioning and operational smoke and/or heat detectors in all units and/or occupancies I'rue False 6. Functioning and operational smoke and/or heat detectors in all units and/or occupancies I'rue False 2. All public areas are equipped with functioning and operational smoke/heat detectors I'rue False 3. All acobi served within the legall allowable time frames I'rue False 4. Applicant is the only occupancy in the building or all deep fat frying appliances have automatic I'rue False 5. Every floor with public access has at least 2 means of geress (exits) I'rue False 6. No exposure to protechnic displays, foam machines, moon bounces, trampolines, rock walls or swimming pools I'rue False 7. No exposure to mechanical viding devices I'r			I False
1. For any building built prior to 1978, 100% of the electric wiring is on functioning and operating circuit breakers Inve False 2. For any building built prior to 1978, there is no aluminum wiring or knob & tube wiring INA Inve False 3. All cooking equipment has an in-force cleaning contract Inve False 3. All cooking equipment has an in-force cleaning contract Inve False 5. Functioning and operational fire extinguishers available Inve False 6. Functioning and operational smoke and/or heat detectors in all units and/or occupancies Inve False 6. Functioning and operational smoke and/or heat detectors Inve False 7. All alcohol served within the legally allowable time frames Inve False 4. Applicant has not, is not and will not act as a Franchisor (Grantor of a Franchise) Inve False 7. All alcohol served within the legally allowable time frames Inve False 4. Applicant is the only occupancy in the building or all deep fat frying appliances have automatic extinguishing systems and are all NFPA 96 compliant Inve False 5. Every floor with public access has at least 2 means of egress (exits) Inve False Inve False 6. No exposure to prochanicial bull or mechanical riding devices			
operating circuit breakers NA True False 2. For any building built prior to 1978, there is no aluminum wiring or knob & tube wiring NA True False 3. All cooking equipment has an in-force cleaning contract True False 4. Business does not operate on a seasonal basis True False 5. Functioning and operational fire extinguishers available True False 6. Functioning and operational smoke and/or heat detectors in all units and/or occupancies True False 7. Applicant has not, is not and will not act as a Franchisor (Grantor of a Franchise) True False 2. All public areas are equipped with functioning and operational smoke/heat detectors True False 3. All alcohol served within the legally allowable time frames True False 5. Every floor with public access has at least 2 means of egress (exits) True False 6. No exposure to pyrotechnic displays, foam machines, moon bounces, trampolines, rock walks or swimming pools True False 7. No exposure to mechanical bull or mechanical riding devices True False 8. Not situated on a vessel Ber on theorem theorem to segres (exits) True False 9. Patrons under 21 years of age are not permitted in the b		and	
3. All cooking equipment has an in-force cleaning contract True False Business does not operate on a seasonal basis Frunctioning and operational fire extinguishers available True False Functioning and operational smoke and/or heat detectors in all units and/or occupancies General Liability Applicant has not, is not and will not act as a Franchisor (Grantor of a Franchise) True False Applicant is the only occupancy in the building or all deep fat frying appliances have automatic extinguishing systems and are all NFPA 96 compliant True False Applicant is the only occupancy in the building or all deep fat frying appliances have automatic extinguishing systems and are all NFPA 96 compliant True False Every floor with public access has at least 2 means of egress (exits) True False No exposure to pyrotechnic displays, foam machines, moon bounces, trampolines, rock walls or swimming pools True False No exposure to mechanical bull or mechanical riding devices True False No thated on a vessel True False No inhalation of oxygen gas from tanks or hookah smoking on premises True False Are same-day memberships available? Are ammeday memberships available? Yes No Are asme-day memberships available?			False
4. Business does not operate on a seasonal basis In the image of the image o			
5. Functioning and operational fire extinguishers available True False Functioning and operational smoke and/or heat detectors in all units and/or occupancies True False General Liability Applicant has not, is not and will not act as a Franchisor (Grantor of a Franchise) True False All public areas are equipped with functioning and operational smoke/heat detectors True False All alcohol served within the legally allowable time frames True False All public areas are equipped with public access has at least 2 means of egress (exits) True False No exposure to pyrotechnic displays, foam machines, moon bounces, trampolines, rock walls or swimming pools True False Not situated on a vessel True False Not situated on a vessel True False Not situated on a vessel True False True False Not situated on a vessel True False Not initiation of oxygen gas from tanks or hookah smoking on premises True False Not initiation of oxygen gas from tanks or hookah smoking on premises True False Not situate on a vessel Are same-day memberships available?			
6. Functioning and operational smoke and/or heat detectors in all units and/or occupancies True False General Liability In public areas are equipped with functioning and operational smoke/heat detectors In rue False 2. All public areas are equipped with functioning and operational smoke/heat detectors In rue False 3. All alcohol served within the legally allowable time frames True False 4. Applicant is the only occupancy in the building or all deep fat frying appliances have automatic True False extinguishing systems and are all NFPA 96 compliant Inrue False 5. Every floor with public access has at least 2 means of egress (exits) Inrue False 6. No exposure to mechanical bull or mechanical riding devices Inrue False 7. No exposure to mechanical bull or mechanical riding devices Inrue False 8. Not situated on a vessel True False 9. Patrons under 21 years of age are not permitted in the bar area after 11:00 p.m. and applicant does Inrue False 10. No inhalation of oxygen gas from tanks or hookah smoking on premises Inrue False 11. Is the applicant a onn-profit Private, Fraternal or Social Club? Yes* No a. Are same-day memberships available? <t< td=""><td></td><td></td><td></td></t<>			
General Liability 1. Applicant has not, is not and will not act as a Franchisor (Grantor of a Franchise) □ True □ False 2. All public areas are equipped with functioning and operational smoke/heat detectors □ True □ False 3. All alcohol served within the legally allowable time frames □ True □ False 4. Applicant is the only occupancy in the building or all deep fat frying appliances have automatic extinguishing systems and are all NFPA 96 compliant □ True □ False 5. Every floor with public access has at least 2 means of egress (exits) □ True □ False 6. No exposure to pyrotechnic displays, foam machines, moon bounces, trampolines, rock walls or swimming pools □ True □ False 7. No exposure to mechanical bull or mechanical riding devices □ True □ False 8. Not situated on a vessel □ True □ False 9. Patrons under 21 years of age are not permitted in the bar area after 11:00 p.m. and applicant does not have "Teen," "Under 21" or similar functions □ True □ False 10. No inhalation of oxygen gas from tanks or hookah smoking on premises □ True □ False Liquor Liability □ Yes* No No * Yes* No 1. Is the applicant a non-profit Private, Fraternal or Social Club? □ Yes* □ No . No . Self se			
1. Applicant has not, is not and will not act as a Franchisor (Grantor of a Franchise) In True False 2. All public arcess are equipped with functioning and operational smoke/heat detectors In True False 3. All alcohol served within the legally allowable time frames In True False 4. Applicant is the only occupancy in the building or all deep fat frying appliances have automatic In True False extinguishing systems and are all NFPA 96 compilant In True False 5. Every floor with public access has at least 2 means of egress (exits) In True False 6. No exposure to protechnic displays, foam machines, moon bounces, trampolines, rock walls or swimming pools In True False 7. No exposure to mechanical bull or mechanical riding devices In True False 8. Not situated on a vessel In True False 9. Patrons under 21 years of age are not permitted in the bar area after 11:00 p.m. and applicant does not have "Teen," "Under 21" or similar functions In True False 10. No inhalation of oxygen gas from tanks or hookah smoking on premises In rue False Liquor Liability In the splicant a non-profit Private, Fraternal or Social Club? Yes* No b. Are same-day memberships available? Yes No No			I False
 All public areas are equipped with functioning and operational smoke/heat detectors All alcohol served within the legally allowable time frames Applicant is the only occupancy in the building or all deep fat frying appliances have automatic extinguishing systems and are all NFPA 96 compliant Every floor with public access has at least 2 means of egress (exits) True False Every floor with public access has at least 2 means of egress (exits) True False Every floor with public access has at least 2 means of egress (exits) True False No exposure to pyrotechnic displays, foam machines, moon bounces, trampolines, rock walls or swimming pools True False No exposure to mechanical bull or mechanical riding devices True False No exposure to mechanical bull or mechanical riding devices True False No tautaet on a vessel Patrons under 21 years of age are not permitted in the bar area after 11:00 p.m. and applicant does not have "Teen," "Under 21" or similar functions True False I. No inhalation of oxygen gas from tanks or hookah smoking on premises Liquor Liability I. Is the applicant a non-profit Private, Fraternal or Social Club? Yess No * Are same-day memberships available? b. Are members permitted to bring more than 3 guests per day (excluding banquet activities and immediate family members)? G. Is self service of alcohol permitted by members? J Yess No c. Is self service of alcohol permitted by members? J Yess No c. Is self service of alcohol permitted by members? J Yess No Kore a condition of coverage General Liability) False
 3. All alcohol served within the legally allowable time frames 4. Applicant is the only occupancy in the building or all deep fat frying appliances have automatic extinguishing systems and are all NFPA 96 compliant 5. Every floor with public access has at least 2 means of egress (exits) 6. No exposure to pyrotechnic displays, foam machines, moon bounces, trampolines, rock walls or swimming pools 7. No exposure to mechanical bull or mechanical riding devices 7. No exposure to mechanical bull or mechanical riding devices 9. Patrons under 21 years of age are not permitted in the bar area after 11:00 p.m. and applicant does not have "Teen," "Under 21" or similar functions 10. No inhalation of oxygen gas from tanks or hookah smoking on premises 11. Is the applicant a non-profit Private, Fraternal or Social Club? 12. Is the applicant a non-profit Private, Fraternal or Social Club? 13. Are same-day memberships available? 14. Are any single drinks sold for less than \$50? 14. Yees I No 24. Are any single drinks sold for less than \$.50? 24. How long has current owner been operating at this location? 24. How long has current owner been operating at this location? 24. How long has current owner been operating at this location? 24. How long has current owner been operating at this location? 25. Loos applicant real common Cause Limit: 26. As a condition of coverage General Liability limits greater than General Liability limits carried? 24. Yees I No 36. Mo explexible accessed explexes that a completed Catering Plus Supplemental Liquor Liability Application, form CP APP, to this submission. 36. What is the latest hour the establishment will ever stay open? 27. AM I M M M M 			
 Applicant is the only occupancy in the building or all deep fat frying appliances have automatic extinguishing systems and are all NFPA 96 compliant I True False Every floor with public access has at least 2 means of egress (exits) I True False No exposure to pyrotechnic displays, foam machines, moon bounces, trampolines, rock walls or swimming pools I True False No exposure to mechanical bull or mechanical riding devices I True False No tsituated on a vessel I True False Patrons under 21 years of age are not permitted in the bar area after 11:00 p.m. and applicant does not have "Teen," "Under 21" or similar functions I True False No taituated on a vessel I True False No taituated on a non-profit Private, Fraternal or Social Club? I Is the applicant a non-profit Private, Fraternal or Social Club? a. Are same-day memberships available? b. Are members permitted to bring more than 3 guests per day (excluding banquet activities and immediate family members)? c. Is self service of alcohol permitted by members? d. Are any single drinks sold for less than \$.50? Yes No Are any single drinks sold for less than \$.50? Yes No As a condition of coverage General Liability limits greater than General Liability limits carried? Yes* No * As a condition of coverage General Liability limits must be maintained at limits equal to or greater than Liquor Liability limits. Does applicant requesting Liquor Liability limits must be maintained at limits equal to or greater than Liquor Liability limits. Tobes applicant ever sell or serve alcohol away from the premises			
 5. Every floor with public access has at least 2 means of egress (exits) a. True a False b. No exposure to pyrotechnic displays, foam machines, moon bounces, trampolines, rock walls or swimming pools b. True a False c. No exposure to mechanical bull or mechanical riding devices c. No exposure to mechanical bull or mechanical riding devices c. Not situated on a vessel c. True a False c. No exposure to mechanical solution of oxygen gas from tanks or hookah smoking on premises c. True a False c. No exposure to forward the premises c. True a False c. No inhalation of oxygen gas from tanks or hookah smoking on premises c. True a False c. Self service of alcohol permitted by members? c. Is self service of alcohol permitted by members? c. Is self service of alcohol permitted by members? d. Are any single drinks sold for less than \$.50? c. Is self service of alcohol permitted by members? d. Are any single drinks sold for less than \$.50? d. Are any single drinks sold for less than \$.50? d. Are same-day memberships available? d. Supplicant requesting Liquor Liability limits greater than General Liability limits carried? d. Yes* a No * As a condition of coverage General Liability limits must be maintained at limits equal to or greater than Liquor Liability limits. 5. Does applicant ever sell or serve alcohol away from the premises? d. Yes* a No * If off-premises coverage is desired, attach a completed Catering Plus Supplemental Liquor Liability Application, form CP APP, to this submission. 6. What is the latest hour the establishment will ever stay open? 		ave automatic	
 6. No exposure to pyrotechnic displays, foam machines, moon bounces, trampolines, rock walls or swimming pools 7. No exposure to mechanical bull or mechanical riding devices 8. Not situated on a vessel 9. Patrons under 21 years of age are not permitted in the bar area after 11:00 p.m. and applicant does not have "Teen," "Under 21" or similar functions 10. No inhalation of oxygen gas from tanks or hookah smoking on premises 11. Is the applicant a non-profit Private, Fraternal or Social Club? 12. Is the applicant a non-profit Private, Fraternal or Social Club? 13. Is the applicant a non-profit Private, Fraternal or Social Club? 14. Are same-day memberships available? 15. Are members permitted to bring more than 3 guests per day (excluding banquet activities and immediate family members)? 15. Is self service of alcohol permitted by members? 16. Are any single drinks sold for less than \$.50? 17. How long has current owner been operating at this location? 17. Is a condition of coverage General Liability limits greater than General Liability limits carried? 19. Yes* I No * As a condition of coverage General Liability limits must be maintained at limits equal to or greater than Liquor Liability limits. 5. Does applicant ever sell or serve alcohol away from the premises? 19. Yes* I No * If off-premises coverage is desired, attach a completed Catering Plus Supplemental Liquor Liability Application, form CP APP, to this submission. 6. What is the latest hour the establishment will ever stay open? 14. Am I PM I 24 hours 		🗅 True 🗆	I False
rock walls or swimming pools In True False 7. No exposure to mechanical bull or mechanical riding devices In True False 8. Not situated on a vessel In True False 9. Patrons under 21 years of age are not permitted in the bar area after 11:00 p.m. and applicant does not have "Teen," "Under 21" or similar functions In True False 10. No inhalation of oxygen gas from tanks or hookah smoking on premises In True False Liquor Liability In the applicant a non-profit Private, Fraternal or Social Club? Yes* No * If yes, please answer the following: a. Are same-day memberships available? Yes No b. Are members permitted to bring more than 3 guests per day (excluding banquet activities and immediate family members)? Yes No c. Is self service of alcohol permitted by members? Yes No d. Are any single drinks sold for less than \$.50? Yes No 2. How long has current owner been operating at this location?			J False
 7. No exposure to mechanical bull or mechanical riding devices 7. No exposure to mechanical bull or mechanical riding devices 8. Not situated on a vessel 7. True = False 9. Patrons under 21 years of age are not permitted in the bar area after 11:00 p.m. and applicant does not have "Teen," "Under 21" or similar functions 1. True = False 10. No inhalation of oxygen gas from tanks or hookah smoking on premises 1. Is the applicant a non-profit Private, Fraternal or Social Club? *If yes, please answer the following: a. Are same-day memberships available? b. Are members permitted to bring more than 3 guests per day (excluding banquet activities and immediate family members)? c. Is self service of alcohol permitted by members? d. Are any single drinks sold for less than \$.50? 2. How long has current owner been operating at this location? 3. Limits desired: Each Common Cause Limit: Aggregate Limit:			- - .
 8. Not situated on a vessel Patrons under 21 years of age are not permitted in the bar area after 11:00 p.m. and applicant does not have "Teen," "Under 21" or similar functions True False 10. No inhalation of oxygen gas from tanks or hookah smoking on premises True False Liquor Liability 1. Is the applicant a non-profit Private, Fraternal or Social Club? Yes* No *If yes, please answer the following: a. Are same-day memberships available? b. Are members permitted to bring more than 3 guests per day (excluding banquet activities and immediate family members)? c. Is self service of alcohol permitted by members? d. Are any single drinks sold for less than \$.50? 2. How long has current owner been operating at this location? 3. Limits desired: Each Common Cause Limit: Aggregate Limit:			
 9. Patrons under 21 years of age are not permitted in the bar area after 11:00 p.m. and applicant does not have "Teen," "Under 21" or similar functions 1. True = False 10. No inhalation of oxygen gas from tanks or hookah smoking on premises 1. True = False Liquor Liability 1. Is the applicant a non-profit Private, Fraternal or Social Club? Yes* = No *If yes, please answer the following: a. Are same-day memberships available? b. Are members permitted to bring more than 3 guests per day (excluding banquet activities and immediate family members)? c. Is self service of alcohol permitted by members? d. Are any single drinks sold for less than \$.50? 2. How long has current owner been operating at this location? 4. Is applicant requesting Liquor Liability limits greater than General Liability limits carried? Yes* = No * As a condition of coverage General Liability limits must be maintained at limits equal to or greater than Liquor Liability limits. 5. Does applicant ever sell or serve alcohol away from the premises? Yes* = No *If off-premises coverage is desired, attach a completed Catering Plus Supplemental Liquor Liability Application, form CP APP, to this submission. 6. What is the latest hour the establishment will ever stay open? 			
not have "Teen," "Under 21" or similar functions I True False 10. No inhalation of oxygen gas from tanks or hookah smoking on premises I True False Liquor Liability Yes* No 1. Is the applicant a non-profit Private, Fraternal or Social Club? Yes* No *If yes, please answer the following: Yes* No a. Are same-day memberships available? Yes No b. Are members permitted to bring more than 3 guests per day Yes No (excluding banquet activities and immediate family members)? Yes No c. Is self service of alcohol permitted by members? Yes No d. Are any single drinks sold for less than \$.50? Yes No 2. How long has current owner been operating at this location? Yes* No 3. Limits desired: Each Common Cause Limit:			
 10. No inhalation of oxygen gas from tanks or hookah smoking on premises Liquor Liability 1. Is the applicant a non-profit Private, Fraternal or Social Club? Yes* No *If yes, please answer the following: a. Are same-day memberships available? b. Are members permitted to bring more than 3 guests per day (excluding banquet activities and immediate family members)? c. Is self service of alcohol permitted by members? d. Are any single drinks sold for less than \$.50? Yes No 2. How long has current owner been operating at this location? 3. Limits desired: Each Common Cause Limit: 4. Is applicant requesting Liquor Liability limits greater than General Liability limits carried? Yes* No * As a condition of coverage General Liability limits must be maintained at limits equal to or greater than Liquor Liability limits. 5. Does applicant ever sell or serve alcohol away from the premises? Yes* No * If sapplicant ever sell or serve alcohol away from the premises? Yes* No * If off-premises coverage is desired, attach a completed Catering Plus Supplemental Liquor Liability Application, form CP APP, to this submission. 6. What is the latest hour the establishment will ever stay open?			J False
 Is the applicant a non-profit Private, Fraternal or Social Club? 'If yes, please answer the following:		🗅 True 🕻	False
 *If yes, please answer the following: Are same-day memberships available? Yes No b. Are members permitted to bring more than 3 guests per day (excluding banquet activities and immediate family members)? C. Is self service of alcohol permitted by members? Yes No C. Is self service of alcohol permitted by members? Yes No 2. How long has current owner been operating at this location? 3. Limits desired: Each Common Cause Limit: Aggregate Limit:	Liquor Liability		
 a. Are same-day memberships available? b. Are members permitted to bring more than 3 guests per day (excluding banquet activities and immediate family members)? c. Is self service of alcohol permitted by members? d. Are any single drinks sold for less than \$.50? Yes No Are any single drinks sold for less than \$.50? Yes No Aggregate Limit: Yes* No Xes Yes* No As a condition of coverage General Liability limits must be maintained at limits equal to or greater than Liquor Liability limits. Does applicant ever sell or serve alcohol away from the premises? Yes* No *If off-premises coverage is desired, attach a completed Catering Plus Supplemental Liquor Liability Application, form CP APP, to this submission. What is the latest hour the establishment will ever stay open? AM PM 24 hours 		□ Yes* □	No
 b. Are members permitted to bring more than 3 guests per day (excluding banquet activities and immediate family members)? Yes No C. Is self service of alcohol permitted by members? Yes No Yes No 2. How long has current owner been operating at this location? 3. Limits desired: Each Common Cause Limit: Aggregate Limit: 4. Is applicant requesting Liquor Liability limits greater than General Liability limits carried? Yes* No * As a condition of coverage General Liability limits must be maintained at limits equal to or greater than Liquor Liability limits. 5. Does applicant ever sell or serve alcohol away from the premises? Yes* No *If off-premises coverage is desired, attach a completed Catering Plus Supplemental Liquor Liability Application, form CP APP, to this submission. 6. What is the latest hour the establishment will ever stay open? AM PM 24 hours 			
 (excluding banquet activities and immediate family members)? C. Is self service of alcohol permitted by members? C. Is self service of alcohol permitted by members? C. Is self service of alcohol permitted by members? C. Is self service of alcohol permitted by members? C. Is self service of alcohol permitted by members? C. Is self service of alcohol permitted by members? C. Is self service of alcohol permitted by members? C. Is self service of alcohol permitted by members? C. Is self service of alcohol permitted by members? C. Yes □ No C. How long has current owner been operating at this location? C. How long has current owner been operating at this location? C. How long has current owner been operating at this location? Aggregate Limit: 4. Is applicant requesting Liquor Liability limits greater than General Liability limits carried? C. Yes* □ No * As a condition of coverage General Liability limits must be maintained at limits equal to or greater than Liquor Liability limits. 5. Does applicant ever sell or serve alcohol away from the premises? C. Yes* □ No * If off-premises coverage is desired, attach a completed Catering Plus Supplemental Liquor Liability Application, form CP APP, to this submission. 6. What is the latest hour the establishment will ever stay open? C. AM □ PM □ 24 hours 			l No
 c. Is self service of alcohol permitted by members? d. Are any single drinks sold for less than \$.50? e. Yes I No f. Yes No Yes No 			
 d. Are any single drinks sold for less than \$.50? 2. How long has current owner been operating at this location? 3. Limits desired: Each Common Cause Limit: Aggregate Limit: 4. Is applicant requesting Liquor Liability limits greater than General Liability limits carried? 4. Is applicant requesting Liquor Liability limits must be maintained at limits equal to or greater than Liquor Liability limits. 5. Does applicant ever sell or serve alcohol away from the premises? Yes* I No * If off-premises coverage is desired, attach a completed Catering Plus Supplemental Liquor Liability Application, form CP APP, to this submission. 6. What is the latest hour the establishment will ever stay open? I AM I PM I 24 hours 			
 2. How long has current owner been operating at this location?			
 3. Limits desired: Each Common Cause Limit: Aggregate Limit: 4. Is applicant requesting Liquor Liability limits greater than General Liability limits carried?			I NO
 4. Is applicant requesting Liquor Liability limits greater than General Liability limits carried? As a condition of coverage General Liability limits must be maintained at limits equal to or greater than Liquor Liability limits. 5. Does applicant ever sell or serve alcohol away from the premises? Yes* I No * If off-premises coverage is desired, attach a completed Catering Plus Supplemental Liquor Liability Application, form CP APP, to this submission. 6. What is the latest hour the establishment will ever stay open? 		imit	
 * As a condition of coverage General Liability limits must be maintained at limits equal to or greater than Liquor Liability limits. 5. Does applicant ever sell or serve alcohol away from the premises? * If off-premises coverage is desired, attach a completed Catering Plus Supplemental Liquor Liability Application, form CP APP, to this submission. 6. What is the latest hour the establishment will ever stay open? 			
 5. Does applicant ever sell or serve alcohol away from the premises? Yes* No *If off-premises coverage is desired, attach a completed Catering Plus Supplemental Liquor Liability Application, form CP APP, to this submission. 6. What is the latest hour the establishment will ever stay open? 			
 *If off-premises coverage is desired, attach a completed Catering Plus Supplemental Liquor Liability Application, form CP APP, to this submission. 6. What is the latest hour the establishment will ever stay open? AM Q PM Q 24 hours 			
CP APP, to this submission. 6. What is the latest hour the establishment will ever stay open? AM PM 24 hours			
6. What is the latest hour the establishment will ever stay open? AM D PM D 24 hours			
			ours

7.	Type of business (check all th			5 · /0/ · 0/ ·			
	Bar/Tavern	Private/Fraternal Club		Dancing/Strip Club			
	Nightclub Revuling Allow	Country Club	Casine Casine		Restauran	،L	
	 Bowling Alley Concessionaire* (describe) 	-		Billiard Hall			
	Convenience/Liquor Store/		100% rotail with	no on promisos con	sumption of alcohol, a		
	15-19 and 21-22 are not appl			no on-premises con	sumption of alconol, qu	lestions	
	□ Other (describe):						
	*If type of business is a banqu	ust hall concessionaire or off	promisos catoror	attach a completed	Cataring Plus Suppler	mental Liquor	
	Liability Application, form CP		-premises caterer,	allacit a completed	Catering Flus Supplei		
8	Gross Annual Receipts: If app		aration or sells alo	pholic beverages for	r on & off premises		
0.	consumption at same location			Sholic beverages for	on a on premises		
	consumption at same location	Bar/Lounge	Restaurant	Banquet	Retail Sales	Other	
	FOOD			-		\$	
	ALCOHOL	\$ \$ _ \$ \$ _ \$ \$ _		ሳ	\$ \$	ቀ ¢	
	OTHER (describe)	\$\$		\$ \$		ቀ ¢	
0	Does applicant have a valid li			Ψ	Ψ □ Yes	Ψ	
	. Has the applicant or any princ	•	t in the applicant f	ilad far bankruntav i			
10	the last 12 months?	cipal with a controlling interes			□ Yes		
11	. Are employees or other perso	and parmitted to consume alo	abol during their b	ours of omployment			
	or service?	ons permitted to consume alco			Yes		
10	. Are <u>all</u> alcohol-servers certifie	d in a Formal Alashal Trainin	a Courso not mon	datad by the state?			
12	*If yes, provide name of the c		g Course not man	ualed by the state?			
	To be considered for a credit		copies of the corti	ficatos to this applia	ation		
	Note: The course must be on		copies of the certi	licates to this applic	allon.		
12	. Violations: Does the applicant		or citations for vi	olation of low or ordi	inance related to illega	ı	
15	activities or the sale of alcoho				inalice related to lifega	1	
			-				
	*If yes, provide the following i						
	Date(s): Description(s):						
	Measures in place to prevent						
1/	. Claims: Has the applicant had		and/or assault and	battery claims or po	tification of notential		
14	liquor liability and/or assault a			ballery claims of the	■ Yes*		
	*If yes, provide the following i		-				
	Date(s):		n(s):				
	Total incurred losses (reserve	e and navments):	1(5)	Status(open or	r closed).		
	Measures in place to prevent				cioseu)		
15	. Does applicant permit "BYOB	" (bring your own bottle) bott	le service or setur	ne?	□ Yes*		
10	*If yes, explain:	(Shing your own Source), Sour					
16	. Does applicant feature any er	ntertainment?			□ Yes*		
10	*If yes: Major Entertainment (
	Adult Entertainmen		Dance ł		DJ with dancing		
		embers, excluding jazz bands			-		
		embers, excluding jazz banda					
	Number of:		times per week	OR		times per va	 > 2 r
		ent (check all that apply):					Jai
		DJ without dancing	Karaoke	Jazz music	ians 🛛 🖵 Juket		
	Mariachi band	•					
	Number of:		times per week	OR		times per va	 > 2 r
17	Are facilities available for ban			01		_ unles per ye	
17	a. Number of:			OR			
	b. Are only the applicant and						Jai
	alcohol is present?*	na aunonzeu employees ol	members hermille	ע נט שבו עב מונטווטו מ		🗆 Yes 🗆 N	10*
	•	alcohol who are not applicar	t's authorized em	Novees or members	required to carry		10
		vith limits greater than or equ		-		🗆 Yes 🗖 🗌	No
12	. Is banquet entertainment prov	. .					
10	a. Number of:			OR		times per ye	
				<u> </u>			201

FINE DINING ESTABLISHMENTS C	NLY:						
19. a. Average entrée price:							
b. Average bottle of wine price							
c. Number of bottles of wine o							
STATE SECTION – Please complete	e the applicable sect	ion below bas	sed on the s	state where op	erations are locat	ed.	
DE, KS, MD, SD and VA:							
Please proceed to Section V							
ALL OTHER STATES:							
20. Does the establishment attract a		•				Yes	🗖 No
21. Does or will applicant ever offer	· ·	nts such as N	lew Year's	Eve parties, et	tc.):		
a. Drink specials/happy hours?						Yes	🗖 No
b. Drink specials/happy hours			10	After 1	11:00 PM?	Yes	🗖 No
c. More than two complimenta						Yes	🛛 No
d. "All you can drink" specials	or other offers involv	ving unlimited	alcoholic b	everages?		Yes	🛛 No
e. Beer for less than \$1.00?							🗆 No
f. Liquor or wine for less than						C Yes	D No
22. a. Are patrons under the legal		•				□ Yes	🗆 No
b. Are patrons under the legal	drinking age permitt	ed on the pre	emises after	11:00 PM?		Yes	🗖 No
23. Minnesota risks only:			A N 4 O				
a. Does applicant have a spec		•		4	alu O	□ Yes	
b. If a Private, Fraternal, or So24. Ohio, Pennsylvania and Texas r		or license rest	rict service	to members o	niy ?	Yes	🗖 No
a. Does the establishment hav	•	tification aco	anar daviaa	to varify ago	of potrop?	Yes	🗆 No
25. List expiring Liquor Liability carri				to verify age of	or patron?		
			<u> </u>		1		_
Carrier	Policy Te	erm		Limits		Premium	
V. ADDITIONAL APPLICANT INFOR							
Form of Business:		n 🗆 Pa	rtnership		□ Other		
	•		•	- 220			
What year did the business start?_							
Applicant's Mailing Address:				(if diff	erent than the loc	ation address above)
City:			State:		Zip:		
Email Address of primary contact:				Phon	e:		
Inspection Contact Name:			Telephor	ne/Email Addre	ess:		
Audit Contact Name:				ne/Email Addre	ess:		

Virginia Notice: Statements in the application shall be deemed the insured's representations. A statement made in the application or in any affidavit made before or after a loss under the policy will not be deemed material or invalidate coverage unless it is clearly proven that such statement was material to the risk when assumed and was untrue.

Minnesota Notice: The clause "and/or authorization or agreement to bind the insurance." is replaced with "Authorization or agreement to bind the insurance may be withdrawn or modified based on changes to the information contained in this application prior to the effective date of the insurance applied for that may render inaccurate, untrue or incomplete any statement made with a minimum of 10 days notice given to the insured prior to the effective date of cancellation when the contract has been in effect for less than 90 days or is being canceled for nonpayment of premium."

Colorado Fraud Statement: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defrauding or attempting to defraud the purpose of defrauding or attempting to defraud the purpose of a settlement or award payable from insurance proceeds shall be reported to the Colorado division of insurance within the department of regulatory agencies.

District of Columbia Fraud Statement: WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

Florida Fraud Statement: You are agreeing to place coverage in the surplus lines market. Superior coverage may be available in the admitted market and at a lesser cost. Persons insured by surplus lines carriers are not protected under the Florida Insurance Guaranty Act with respect to any right of recovery for the obligation of an insolvent unlicensed insurer.

Kentucky Fraud Statement: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime.

Maine and Washington Fraud Statement: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefits. New Jersey Fraud Statement: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

New York Fraud Statement: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

Ohio Fraud Statement: Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Oklahoma Fraud Statement: WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

Pennsylvania Fraud Statement: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

Tennessee and Virginia Fraud Statement: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

Fraud Statement (All Other States): Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance may be guilty of a crime and may be subject to fines and confinement in prison.

Applicant's Signature:	Title:	Date:
If your state requires that we have information regarding your Authorized	Retail Agent or Broker, please	
Retail Agency Name:	L	icense #:
Main Agency Phone Number:		
Agency Mailing Address:		
City: 5	State: 2	Zip Code: