

LIQUOR LIABILITY SUPPLEMENTAL APPLICATION

Dependent upon state authority, you are applying for insurance coverage provided by and underwritten by one of the following insurance companies of ARGO GROUP US:

COLONY INSURANCE COMPANY ▪ COLONY SPECIALTY INSURANCE COMPANY

Applicant's Name: _____

Mailing Address: _____

Location Address: _____

Web site Address: _____

PROPOSED EFFECTIVE DATE:

From _____ To _____ 12:01 A.M., Standard Time at the address of the Applicant

ANSWER ALL QUESTIONS—IF THEY DO NOT APPLY, INDICATE "NOT APPLICABLE"

Applicant is: Individual Corporation Partnership Joint Venture
 Limited Liability Company Other (Specify): _____

1. Classification of risk:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Arena/Stadium | <input type="checkbox"/> Comedy Club | <input type="checkbox"/> Fairground | <input type="checkbox"/> Night Club |
| <input type="checkbox"/> Auditorium | <input type="checkbox"/> Concession Stand | <input type="checkbox"/> Gentlemen's/Strip Club | <input type="checkbox"/> Restaurant |
| <input type="checkbox"/> Banquet Hall | <input type="checkbox"/> Convenience Store | <input type="checkbox"/> Grocery Store | <input type="checkbox"/> Social Club |
| <input type="checkbox"/> Bar/Tavern | <input type="checkbox"/> Distributor/Wholesaler | <input type="checkbox"/> Hotel/Motel | <input type="checkbox"/> Special Event |
| <input type="checkbox"/> Bowling Alley | <input type="checkbox"/> Drive-through Daiquiri Shop | <input type="checkbox"/> Liquor Manufacturer/Brewery | <input type="checkbox"/> Sports Field |
| <input type="checkbox"/> Casino/Gaming | <input type="checkbox"/> Exercise Studio | <input type="checkbox"/> Liquor/Package Store | <input type="checkbox"/> Winery |
| <input type="checkbox"/> Catering Service | <input type="checkbox"/> Exhibit Hall | <input type="checkbox"/> Microbrewery | |
| <input type="checkbox"/> Other (Describe): _____ | | | |

2. Are patrons allowed to bring their own alcoholic beverages?..... Yes No

3. Have you ever been assessed a fine for violation of a law concerning the sale of alcohol, or had your liquor license suspended/revoked? Yes No
 If yes, when and why? _____

4. Estimated liquor receipts: \$ _____ **Estimated food receipts: \$** _____
Other receipts (cover charges, merchandise etc.): \$ _____
Percentage of liquor receipts to total receipts: _____ %

5. Percent of receipts for on-premises versus off premises consumption: _____ %

6. **Maximum Occupancy:** _____ ; **What's the average attendance on a weekly night:** _____
7. **How many days per week is the location open?** _____
8. **What time does the location close?** _____ **Hours of serving?** _____
9. **Have all servers been through alcohol awareness server training (i.e. TIPS, TOPS)?** Yes No
 Type of course: _____
 How often required? _____
 Ride home policy? Yes No
10. **How often does the manager review liquor liability laws with employees** (including penalties for serving intoxicated customers)? _____
11. **Are procedures in place regulating the sale of alcohol to minors and those under the influence?** Yes No
 If yes, describe: _____
 How is age of customer verified? _____
12. **Do you have "Happy Hour" or 2-for-1 drink specials?** Yes No
 Is last call announced? Yes No
 Are customers allowed more than one drink at last call? Yes No
13. **Security Activities:**
 Security provided by (check all applicable)
 Bouncers Doormen Off Duty Police
 Contracted Security Firms: inside outside armed unarmed
 Any firearms kept or carried on the premises? Yes No
 Is Assault and Battery Required? Yes No
14. **Are there procedures for handling violent or disruptive patrons?** Yes No
 If yes, please describe? _____
15. **Types of entertainment activities:**
 Other activities that would include patron participation (such as: wrestling, boxing, volleyball, etc.):
 Special Promotions Yes No
 If yes, describe: _____
16. **Gentlemen's/Strip Clubs:** Not Applicable
 Does applicant prohibit serving of alcohol after hours to their staff? Yes No
 Are clients allowed to purchase drinks for dancers/hostesses? Yes No
17. **Manufacturer:** Not Applicable
 Are free samples given? Yes No
 If yes, how is quantity controlled? _____
18. **Distributor:** Not Applicable
 Any sponsored events? Yes No
 If yes, describe: _____
 Policy for giving away alcoholic beverages by Sponsor? Yes No
 If yes, describe: _____
19. **Caterers:** Not Applicable
 Does caterer provide liquor or bartending service? Yes No

*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, may be committing a fraudulent insurance act, and may be subject to a civil penalty or fine.

* Not applicable in all states

SIGN AND DATE:

PRODUCER'S SIGNATURE	DATE
APPLICANT'S PRINTED NAME	DATE
APPLICANT'S SIGNATURE	DATE