

Other Entertainment or Additional Descriptions: _____

Describe type of music:

<input type="checkbox"/> Top 40's/Pop	<input type="checkbox"/> Classic Rock	<input type="checkbox"/> Soft Rock
<input type="checkbox"/> Alternative	<input type="checkbox"/> Country	<input type="checkbox"/> Jazz
<input type="checkbox"/> R & B	<input type="checkbox"/> Other: _____	

What is the size of area used for dancing when tables are "shoved aside"? _____

Are dancing areas raised or elevated? Yes No

Does the applicant charge a cover charge? Yes No

SPECIAL EVENTS

Does your special event have a liquor license? Yes No

If "No" to the above, does the event have a subcontracted liquor vendor with license? Yes No

Is liquor served in a fenced off area (permanent or temporary)? Yes No

Is there a procedure for checking ID's of patrons entering the liquor-serving area? Yes No

Is there a limit to the number of alcoholic beverages served to a patron at any one time? Yes No

What is that drink limit? _____

LOSS HISTORY

Violations: Within the last 5 years, has applicant been fined or cited for violations related to illegal activities or the sale or service of alcohol? _____

Claims: Within the last 5 years, has applicant had any reported liquor liability claims or notifications or potential liquor liability claims? Yes No

If so, please explain: _____

Within the last 5 years, has the applicant had any Assault or Battery claims? Yes No

Are you aware of any other incidents, conditions, circumstances, defects or suspected defects which may result in claims against you? Yes No

IMPORTANT NOTICE

I DECLARE THAT THE STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND TRUE.

Any person who knowingly and with intent to defraud any insurance company or another person submits an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information containing any material fact thereto, commits a fraudulent act that is subject to criminal and substantial civil penalties. I agree that any intentional concealment or misrepresentation of a material fact concerning this insurance or the subject thereof may void any policy issued.

(As part of our underwriting procedures, a routine inquiry may be made to obtain applicable information concerning character, general reputation, and credit history. Upon your written request, additional information as to the nature and scope of the report, if one is made, will be provided.)

Applicant Signature

Title

Date

Producer Signature

Date

Producer Name and Address



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