



Application – Liquor \*

Date \_\_\_\_\_

Tax Id \_\_\_\_\_

Name Insured (Licensee) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name Insured (Owner) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Location Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Inside City Limits? Yes      No      Years in business at Location? \_\_\_\_\_

**Type of Business**

Restaurants / Night Clubs / Banquets

Store Liquor / Grocery

Bar / Tavern

**Hours of Operations**

Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_

Friday \_\_\_\_\_ Saturday \_\_\_\_\_ Sunday \_\_\_\_\_

Estimated Annual Receipts: Bar \_\_\_\_\_ Package \_\_\_\_\_ Food \_\_\_\_\_

Is License restricted to Beer & Wine only? Yes      No      Service Bar? Yes      No

Live Entertainment? Yes      No      Pool Tables, Electronic Games etc.? Yes      No

Gimmicks? Yes      No      If Private Club, is there a hall rented to Non Members? Yes      No

**Check Off Limit of Liability Desired**

300,000      500,000      750,000      1,000,000      Other \_\_\_\_\_

In the last 5 years, has any company cancelled, refused to issue, or renew liquor liability insurance on this risk? Yes      No

Has this risk ever had its licensed revoked? Yes      No

Priory Carrier Name \_\_\_\_\_ Policy Number \_\_\_\_\_ Premium for last 5 Years \_\_\_\_\_

Claims Record (Last 5 Years) \_\_\_\_\_

Is Limited Common Law coverage desired? Yes      No      Limits \_\_\_\_\_

Contact Information for person responsible for Inspection

Contact Name \_\_\_\_\_ Contact Phone # \_\_\_\_\_ Contact Email \_\_\_\_\_

- Non-binding