

**COLONY INSURANCE COMPANY – COLONY SPECIALTY INSURANCE COMPANY  
PELEUS INSURANCE COMPANY**

**CONTRACT DIVISION - LIQUOR LIABILITY - SUPPLEMENTAL APPLICATION**

ACORD Application also required - Check all applicable checkboxes below

<b>General Agent:</b>	<b>Date:</b>
<b>Insured:</b>	
<b>Insured Mailing Address:</b>	
<b>Insured's Web Address:</b>	
<b>Insured Contact Name:</b>	<b>Phone Number:</b>

**PROHIBITED** (check all that apply to your operations)

- Athletic games, Contact sports, Contests of any kind
- Bouncers or employees with any type of security related duty
- BYOB establishments
- Casinos, Gentlemen's Clubs, stand-alone bar/tavern risks
- Catering operations that are 100% liquor, no food
- Firearms on premises, but off-duty peace officers are acceptable
- Guides and outfitters, Hunt Clubs
- Hours extend beyond 2 a.m.
- License revocations
- Mechanical rides or devices
- Mobile Home Parks
- Procedures not formally in place to restrict the sale of alcohol to minors or those under the influence
- Stand alone coverage without the support of the CGL
- State(s) the insured operates in include HI, IA, MI, MN or NM

**YEARS IN BUSINESS / EXPERIENCE**

\_\_\_\_\_ Years in business as the 'Named Insured' indicated on this application

\_\_\_\_\_ Years' experience in the operations indicated on this application - Attach resumes if available

- Has applicant had an insurance policy cancelled or non-renewed in past 3 years? If yes, explain.  
(Missouri Applicants - Do not answer this question)

- Applicant in receivership
- Bankruptcy (Chapter 7, 11 or 13) has been filed in past 5 years

**LICENSING**

- Licenses and permits as required by law are in place

**TIPS / TOPS LIQUOR SERVICE TRAINING**

- Training (TIPS, TOPS or similar) is provided to ALL employees handling liquor

**LIQUOR LIABILITY - SUPPLEMENTAL APPLICATION**

**LOSS HISTORY / CITATIONS**

- Three years of loss history information provided on ACORD application or attached to this application
- Assault and Battery incident(s) have occurred in the past 3 years
- Citations, fines or suspensions have been received in the past. If yes, explain:

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**OPERATIONS / EXPOSURES / CONTROLS**

- Live entertainment
- College or university nearby and location has the reputation as being a school hangout for students
- Cover charges are collected
- ID's are consistently checked

**RECEIPTS**

Total of Liquor Receipts Only	\$
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**GENERAL FRAUD STATEMENT (Not applicable in all states.)**

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.

*The undersigned is an authorized representative of the applicant and certifies that reasonable inquiry has been made to questions on this application. He/She certifies:*

- The answers are true, correct and complete to the best of his/her knowledge.*
- They agree to the Privacy and Fraud provisions found in the ACORD-125 (Commercial Insurance Application) and understand those provisions also apply to this supplemental application.*

**SIGN AND DATE**

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