

P.O. Box 650 • 57 Parker Rd. • Barre, VT 05641 • 800-548-4301 • www.neee.com

SPECIAL EVENTS LIQUOR LIABILITY / GENERAL LIABILITY APPLICATION

1. I	Producer Number, User Name					
2. I	2. Event Type:					
Ľ	Beer Tent/Garden	Charitable Fundraiser	Eairs or Festivals	Memorial Service		
[Silent Auction	Party	Dinner	Luncheon		
[Picnic	U Wedding	Shower	Recital		
Ľ	Shows (Car, Planes, etc.)	Reunion	Tours	Other:		
3	Type of Facility for the Event:					
Ľ	Private Residence	Restaurant/Catering Hall	🗌 Bar	Dance Club		
[Casino	Eairground	Private Club	Convention Center		
[Arena	🗌 Hall	Public Park	Playground		
[Street	Ball Park	Beach	Dock		
[Other Athletic/Sports			Other:		
4. /	Applicant's Legal Name:					
5. I	Doing Business As:					
6. I	Mailing Address:					
7. (Official Name of Event:					
		A				
		purpose of event (attach copy				
-						
		esponsibility in the event:				
12. I	Date of Event: From: _	To:				
	(If one day event, end date shou continue past 12:00 am.)	d be the same as the start date.	Quote will contemplate cov	verage for events which		
		am 🗌 pm	То	🗌 am 🗌 pm		
		r from desired coverage date(s this application will apply is exer				

15. Coverage Selection:

		r Liability (All States <u>EXCEPT</u> Al ommercial General Liability only (a	-
. Limits of Coverage	e Desired:		
Package General I	Liability & Liquor Liability (A	Il States <u>EXCEPT</u> AL, FL, IA, & MI	
		ability. General Liability coverage	e is not available in AL or F
Package Limits:	\$100,000/\$200,000	\$300,000/\$600,000	
Liquor Liability on	ly (All states <u>EXCEPT</u> AL, IA	, and MN). Assault & Battery is ex	kcluded.
Liquor Limits:	\$100,000/\$200,000	\$300,000/\$600,000	\$500,000/\$1,000,000
	\$1,000,000/\$1,000,000	<pre>\$1,000,000/\$2,000,000</pre>	
	r Liability (monoline or pac included at occurrence limit	kaged with General Liability). N	OTE: Assault & Battery f
Liquor Combined Si			
\$150,000/\$300),000 🗌 \$200,000/\$400,0	000 🗌 \$300,000/\$600,000	\$400,000/\$800,000
\$500,000/\$1,0	00,000 🗌 \$750,000/\$1,500	,000 [\$1,000,000/\$2,000,000	
Liquor Split Limits:			
<pre>\$50,000/\$100, (PD=\$5,000)</pre>		000/\$100,000/\$200,000	75,000/\$150,000/\$300,000
\$100,000/\$200),000/\$400,000 🗌 \$125	5,000/\$250,000/\$500,000	250,000/\$500,000/\$1,000,000
<u>Iowa only:</u> Gener General Liability is		kaged with Liquor Liability). NO	TE: Assault & Battery for
General Liability	\$100,000/\$200,000	\$300,000/\$600,000	\$500,000/\$1,000,000
Limits:	\$1,000,000/\$1,000,000	\$1,000,000/\$2,000,000	
for Liquor Liabilit		packaged with General Liability limits. Liquor Liability coverage ackage policy.	
Liquor Limits:	\$300,000/\$310,000	\$300,000/\$600,000	\$500,000/\$1,000,000
	<pre>\$1,000,000/\$1,000,000</pre>	<pre>\$1,000,000/\$2,000,000</pre>	
Minnesota only: General Liability is		ackaged with Liquor Liability) NO	TE: Assault & Battery for
General Liability	\$300,000/\$600,000	\$500,000/\$1,000,000	\$1,000,000/\$1,000,000
Limits:	\$1,000,000/\$2,000,000		
. Estimated total att	endees per day:	Average age of attendees:	

20.	Wil	I there be overnight camping?		Yes	No
21. Water hazards?					No
		If yes, describe:			
22.	Wil	l attendees be permitted to swim, board, jet ski or fish?		Yes	No
23.		Liquor Liability:			
	a.	Is the Applicant in the business of selling, serving or furnishing alcoholic beverages?		Yes	No
	b.	Is the Applicant required to have a valid liquor license for the event?		Yes	No
	c.	Is Applicant the sole vendor/server of alcohol at the event?		Yes	No
		If no, list number of other vendors/servers serving alcohol:			
	d.	If there are multiple vendors, are all participating alcohol vendors/servers required to carry Liquor Liability limits for the event equal to or greater than Applicant?		Yes	No
	e.	Will alcohol be dispensed by a professional bartender or server that has taken a formal alcohol awareness training course?		Yes	No
		If no, who will be serving the alcohol?			
		Describe alcohol servers			
	f.	Is there an admission charge?		Yes	No
		Does admission include liquor?		Yes	No
	g.	Will employees or volunteers serve alcohol?		Yes	No
	h.	Will alcohol be sold by Applicant?		Yes	No
	i.	Will Applicant allow employees, independent contractors or volunteers to consume alcohol before, during, or after hours of employment?		Yes	No
	j.	Will attendees be allowed to self-serve alcohol?		Yes	No
	k.	Will there be an open bar?		Yes	No
	١.	Will there be a service bar only?		Yes	No
	m.	Will there be only beer and wine served?		Yes	No
	n.	Will attendees be able to bring in their own alcohol?		Yes	No
	0.	Will alcohol consumption be confined to certain areas?		Yes	No
	p.	Will alcohol be served of furnished without a charge?		Yes	No
	q.	Are IDs checked?		Yes	No
	r.	Are measures in place to prevent serving to minor and/or intoxicated patrons?		Yes	No
		Describe control measures:			
	s.	Will there be a limit placed on the number of alcoholic beverages purchased at a time?		Yes	No
	t.	Are alcohol sales stopped at least one hour before the end of event/closing?		Yes	No

24. Commercial General Liability:

a.	Will the event feature any of the following: aircraft, bungee, climbing devices, contex demolition, dunk tank, firearms, fireworks, hot air balloons, inflatables, pyrotechnics, racing, rodeos, stunts, trampolines or watercraft?		Yes	No
b.	Will the event feature exhibitions (race cars, equipment, etc.), demonstrations (cooking, glass blowing, etc.) or other activities not specified above?		Yes	No
	If yes, demonstration or activity:			
c.	Will alcohol be allowed at the event?		Yes	No
d.	Describe security, provided by:			
	🗌 Employee 🗌 On Duty Police 🗌 Independent Contractor			
	If security is provided by independent contractors, are they required to carry their own insurance?		Yes	No
	Will attendees be checked for weapons and alcohol upon entry?		Yes	No
e.	Are vendors, attraction operators and performers required to carry insurance and to provide additional insured coverage to the Applicant?		Yes	No
f.	Is this a concert/musical event?		Yes	No
g.	Are any local or national celebrities performing at the event?		Yes	No
	Describe celebrity/celebrities:			
h.	Describe type of music:			
i.	Will there be exposure from any dancing, moshing, crowd surfing, stage diving or similar activities?		Yes	No
j.	Will food be sold/served?		Yes	No
k.	Is this a parade event?		Yes	No
١.	Are there any athletic events? (Athletic participant coverage is not available.)		Yes	No
	Athletic event level: 🗌 Professional 🗌 Amateur			
	Type(s) of athletic events:			
	Number of athletic events scheduled:			
m.	Any temporary bleachers, grandstands, seating, tents and/or temporary structures erected?		Yes	No
	If so, by whom?			
	Do the installers carry insurance and do they provide additional insured coverage to the Applicant?		Yes	No
n.	Any babysitting, childcare services or programs offered?		Yes	No
0.	Has the Applicant confirmed that the venue has working emergency lighting, illuminated exit signs and panic door hardware.		Yes	No
p.	Does the event have a Liquor Liability exposure including "BYOB"?		Yes	No
	(We do not offer monoline General Liability coverage for an event if there is a Liquor Liability exposure.)	also	а	

25. History

- a. Number of years this event has been held:
- b. Was the Applicant an alcoholic beverage vendor for this event last year?

Name of Liquor Liability carrier:______ Name of General Liability carrier (if different):______ Premium last year: \$______

C. Over the period of the last 5 years, have you incurred any General Liability, Liquor
Liability or Assault & Battery losses/claims; or have you been assessed a fine or received
a citation for violations of law concerning the sale, serving or providing of alcoholic
beverages? If yes, complete the following:

Date of Loss	Type of Loss	Description of Loss	Amount Paid	Amount Reserved	Status of Claim (O=Open C=Closed)

26. Additional Insureds and Certificate Holders

Liquor Liability Name: General Liability Address Additional Insured Certificate Holder Interest _____ Name: _____ Liquor Liability General Liability Additional Insured Certificate Holder Address Interest

No

∃ No

INDICATE APPLICABLE SECTION(S)

FRAUD WARNINGS

FOR APPLICANTS IN THE FOLLOWING STATES:

COLORADO – 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 defraud the policyholder or claimant with regard to 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 – 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 – Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

MARYLAND – Any person who knowingly or willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly or willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

NEW YORK – 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 – Any person who, with intent to defraud or knowing that he/she 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 – **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.

OREGON – Any person who knowingly and with intent to defraud any insurance company or other person: (1) files an application for insurance or statement of claim containing any materially false information; or (2) conceals for the purpose of misleading, information, information concerning any material fact, may have committed a fraudulent insurance act, which may be a crime and may subject the person to penalties.

PUERTO RICO – Any person who knowingly and with intent to defraud, presents false information in an insurance request form, or who presents, helps or has presented a fraudulent claim for the payment of a loss or other benefit, or presents more than one claim for the same damage or loss, will incur a felony, and upon conviction will be penalized for each violation with a fine of no less than five thousand dollars (\$5,000) nor more than ten thousand dollars (\$10,000); or imprisonment for a fixed term of three (3) years or both penalties. If aggravated circumstances prevail, the fixed established imprisonment may be increased to a maximum of five (5) years; if attenuating circumstances prevail, it may be reduced to a minimum of two (2) years.

FOR APPLICANTS IN ALABAMA, ARKANSAS, ARIZONA, LOUISIANA, NEW MEXICO AND WEST VIRGINIA:

Any person who knowingly presents a false claim or fraudulent claim for payment of a loss or benefit or who knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines or confinement in prison.

FOR APPLICANTS IN MAINE, TENNESSEE, VIRIGINA AND WASHINGTON:

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 denial of insurance benefits.

FOR APPLICANTS IN ALL OTHER STATES:

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

WARRANTIES AND REPRESENTATIONS

In submitting this Application, the undersigned warrants and represents that:

- a) The information in this Application and all attachments are true and complete as of the date submitted;
- b) Founders Insurance Company may, and is intended to rely upon such information in determining whether to issue insurance coverage and, if so, at what premium and upon what terms;
- c) Upon any change in circumstances which bear upon the accuracy or completeness of the undersigned's representations herein, he/she shall notify Founders Insurance Company immediately in writing and such notice shall become a part of this Application;
- Founders Insurance Company may change the quoted premium and/or the terms of any coverage if, subsequent to the submission of this Application, it becomes aware of any such circumstances, whether by notice from the undersigned or otherwise;
- e) Neither the insured nor any principal with a control interest in the insured, has filed for bankruptcy within 12 months prior to the date the application is signed;
- f) General Liability insurance is carried by the insured at limits equal to or greater then Liquor Liability on our policy;
- g) The insured has and will maintain a valid liquor license prior to the insured selling, serving or distributing alcohol.
- h) The undersigned authorizes all former liability insurers and all accounting firms to disclose to Founders Insurance Company and/or its agents all available information concerning the undersigned's prior underwriting or claims history and liquor purchases and receipts, and releases all such former liability insurers and accounting firms, Founders Insurance Company and its agents from any liability resulting from such disclosures and use, even if such information is incomplete or erroneous;
- Upon submission of this application and at any time thereafter the undersigned shall make available to Founders Insurance Company and its agents access to the premises and operations to be insured for an inspection and copies of the last four (4) calendar quarters of sales tax returns;
- j) The submission of this Application shall not bind Founders Insurance Company or its agents to the issuance of insurance coverage, nor shall it bind the undersigned to accept insurance coverage; and
- k) Should Founders Insurance Company issue insurance coverage which is accepted by the undersigned:
 - The undersigned shall allow Founders Insurance Company to audit its books, records, and operations, including an audit of the estimated liquor receipts to ensure their accuracy and/or actual liquor receipts for any relevant time period;
 - 2) The undersigned shall maintain accurate books and records of its liquor receipts for three (3) years following policy expiration and shall send to Founders Insurance Company copies of any documents requested;
 - 3) The premium payable for the insurance coverage is a deposit premium only and may be adjusted by Founders Insurance Company at any time during the policy period and up to three years after its expiration based upon the rates in effect at policy inception; and
 - 4) The undersigned shall pay any additional premium due to Founders Insurance Company within fifteen (15) days of receipt of an invoice.

Applicant's Signature:		Title:		Date:	
	(Required)		(Required)		(Required)
Agent's Signature:		Date:			
	(Required)		(Required)		