



Liquor Liability Application Bar/Restaurant Product

TEXAS LIQUOR LIABILITY WARRANTY APPLICATION

YOU CAN OBTAIN A QUOTE BY PROVIDING THE INFORMATION IN SECTION I - INSTANT QUOTE BELOW, SUBJECT TO THE REMAINDER PROVIDED PRIOR TO BINDING.

I. INSTANT QUOTE INFORMATION

Instant Quote is only available for accounts with no losses or violations in the past five years. If there is a loss or violation history, please complete the entire application.

Applicant's name: _____

Location address: _____ Same as mailing address.

City: _____ State: _____ Zip: _____

Web address: _____

Number of locations to be insured: _____ (complete one application per location)

Description of operations:

What year did the applicant start business at this location? _____

How many years experience does applicant have owning or managing this type of operation? _____

Food Sales	Alcohol Sales-On Premises Consumption	Alcohol Sales-Off Premises Consumption	Other Receipts (Describe)
\$ _____	\$ _____	\$ _____	\$ _____

Each Common Cause Limit: \$ _____

Aggregate Limit: \$ _____

What is the latest hour of operation? _____

AM PM 24 hours

What time does the sale of alcohol cease? _____

AM PM 24 hours

Does the applicant feature any entertainment? Yes No

If yes, check all of the following types that apply:

- Adult entertainment/Exotic dancing Number of times per week _____ or per year _____
- Bands (3 or more members, excluding jazz bands) Number of times per week _____ or per year _____
- DJ with dancing Number of times per week _____ or per year _____
- Dance club/dance hall Number of times per week _____ or per year _____
- Banquet entertainment Number of times per week _____ or per year _____

Does the applicant ever employ bouncers, security or doorpersons? Yes No

Have all servers, sellers of alcohol and their managers been trained in a "Texas Alcohol Beverage Control Commission (TABC)" approved alcohol awareness training program? Yes No

Does applicant have written policies for responsible alcohol service and ensures each employee understands these policies? Yes No

Does the establishment attract a predominantly youthful clientele ranging from 21-25 years of age? Yes No

Does the establishment utilize an identification scanner on all patrons regardless of age? Yes No

Is BYOB (bring your own bottle) permitted for other than banquet operations? Yes No

If yes, complete the following:

What is the maximum occupancy of the establishment? _____

What percentage of patrons brings their own bottle? less than 50% 50% or more

Does the establishment have a bar with seating? Yes No

Does the applicant offer on-premises tasting or sampling of alcoholic beverages in conjunction with any retail operation? Yes No

Additional Insureds:

Name	Relationship/Interest	Address	City, State, Zip

II. GENERAL ELIGIBILITY CRITERIA SECTION – COMPLETE FOR ALL APPLICANTS

1. Has the applicant or any principal with a controlling interest in the applicant filed for bankruptcy in the last 12 months? Yes No
2. Will the applicant maintain a valid liquor license, if required by ordinance or law, prior to the applicant selling, serving or distributing alcohol? Yes No Not Required

a. Name on the license: _____

b. License #: _____

3. Is the applicant a franchisee? Yes No
4. Does the applicant ever sell or serve alcohol away from the premises? Yes No

If Off-Premises coverage is desired, complete our Catering Plus Supplemental Liquor Liability Application, form CP-LLA.

5. Are employees or other persons selling or serving alcohol permitted to consume alcohol during their hours of employment or service? Yes No

6. Does or will the applicant ever offer:
- a. Bottle service or set-ups? Yes No
- b. Beer pong or other drinking games? Yes No
- c. More than two complimentary drinks per patron per day? Yes No
- d. "All you can drink" specials or other offers involving unlimited alcoholic beverages? Yes No

7. Are patrons under the legal drinking age permitted on the premises? Yes No

8. Are patrons under the legal drinking age permitted on the premises past 11:00 pm? Yes No

9. Have there ever been any reported liquor liability and/or assault or battery claims or notification of potential liquor liability and/or assault or battery claims at this location within the past five years? Yes No

If yes, provide the following information on each claim:

Date(s): _____

Description(s): _____

Total incurred losses (reserves and payments): _____

Status: _____

Measures in place to prevent future incidents: _____

10. Have there been any citations, violations, charges or enforcement actions at this location within the past five years? Yes No

If yes, provide the following information on each citation, violation, charge or enforcement action:

Date(s): _____

Description(s): _____

Measures in place to prevent future incidents: _____

11. Does the applicant maintain general liability insurance at limits equal to or greater than applicant's liquor liability limits? Yes No

As a condition of coverage, general liability limits must be maintained at limits equal to or greater than applicant's liquor liability limits.

12. Within the past five years, has the applicant's liquor liability coverage been cancelled or non-renewed? Yes No

If yes, explain: _____

III. COMPLETE ALL APPLICABLE SECTIONS

A. RESTAURANTS OR BARS WITH BANQUET OPERATIONS:

Note: If operation is strictly a banquet hall, attach a completed **Catering Plus Liquor Liability Application, form CP-LLA**, to this submission.

13. a. Are only the applicant and its authorized employees or members permitted to serve alcohol at all events where alcohol is present? Yes No

- b. If persons serving alcohol are not the applicant or its authorized employees or members, are they required to carry Liquor Liability insurance with limits equal to or greater than limits covered under applicant's liquor policy? Yes No

B. FINE DINING ESTABLISHMENTS:

14. a. Is the average entrée price greater than \$20.00? Yes No

- b. Is the average bottle of wine price greater than \$30.00? Yes No

- c. Is the number of bottles on the wine list greater than 10? Yes No

C. NON-PROFIT PRIVATE, FRATERNAL OR SOCIAL CLUBS:

15. a. Is the applicant a **non-profit** private, fraternal or social club? Yes No

- b. Are same day memberships available? Yes No

- c. Are members permitted to bring more than 3 guests per day (excluding banquet activities and immediate family members)? Yes No

- d. Is self-service of alcohol by members permitted? Yes No

- e. Are any single drinks sold for less than \$0.50? Yes No

- f. Is BYOB (bring your own bottle) permitted for banquet operations only? Yes No

D. BRING YOUR OWN BOTTLE (BYOB) RESTAURANTS:

- 16. a. Does the establishment have a wait staff that actively monitors all alcohol consumption, and requests a valid ID from all patrons? Yes No
- b. Are patrons permitted to bring hard alcohol on the premises? Yes No

E. ON-PREMISES TASTING OF ALCOHOL:

- 17. a. Is eight ounces the maximum amount of complimentary samples permitted for any one patron per day? Yes No
- b. If someone other than the applicant's employees is serving the samples, are they required to carry their own Liquor Liability insurance at limits equal to or greater than the applicant's? Yes No

IV. ADDITIONAL APPLICANT INFORMATION

Form of business: Individual Corporation Partnership LLC Other _____

Applicant's mailing address: _____ (if different than the location address above)

City: _____ State: _____ Zip: _____

Email address of primary contact: _____

Phone: _____

Inspection contact name: _____ Telephone/E-mail address: _____

Audit contact name: _____ Telephone/E-mail address: _____

Applicant's Warranty Statement: I warrant that the information provided in this Application, and any amendments or modifications to this Application are true and correct. I acknowledge that the information provided in this Application is material to acceptance of the risk and the issuance of the requested policy by Company. I agree that any claim, incident, occurrence, event or material change in the Applicant's operation taking place between the date this application was signed and the effective date of the insurance policy applied for which would render inaccurate, untrue or incomplete, any information provided in this Application, will immediately be reported in writing to the Company and the Company may withdraw or modify any outstanding quotations and/or void any authorization or agreement to bind the insurance. Company may, but is not required, to make investigation of the information provided in this Application. A decision by the Company not to make or to limit such investigation does not constitute a waiver or estoppel of Company's rights.

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

Applicant's signature: _____ Title: _____ Date: _____

(Owner, Officer or Partner)

(Required)

(Required)

If your state requires that we have information regarding your Authorized Retail Agent or Broker, please provide below.

Retail agency name: _____ License#: _____

Main agency phone number: _____

Agency mailing address: _____

City: _____ State: _____ Zip: _____

Agreement to Comply with “Safe Harbor Act” Requirements

There is a provision under the Texas Alcoholic Beverage Code known as the “safe harbor defense.” Under this provision, an employer may be protected from administrative fines and sanctions if one of their employees makes an illegal sale of alcohol. To receive this protection, the employer must meet specific criteria demonstrating how they advocate and support safe service of alcohol within their establishment.

Complying with “Safe Harbor Act” requirements will help protect your business, liquor license, employees, customers and communities.

In addition, you can earn a 20% credit on your liquor liability premium with United States Liability Insurance Group!

Here’s all you need to do:

1. All servers and sellers of alcohol (and their managers) must complete a current alcohol awareness training course approved by the Texas Alcohol Beverage Control Commission (TABC). Any course approved by the Texas Alcohol Beverage Control Commission is acceptable. Following are two examples of TABC-approved programs:
 - a. Learn2Serve provides TABC certification online! We have arranged for discounted pricing (\$15 per person) for United States Liability Group insureds. Register through www.LiquorTraining.com to receive the discounted pricing or call 800-442-1149, ext. 154 for more information.
 - b. TIPS trainers are available throughout the country: Call 800-438-8477 or visit www.gettips.com for information on obtaining TIPS training.
2. Have a written policy on responsible alcohol service. The policy should be reviewed with each employee and displayed prominently in your establishment. You should have each employee sign the alcohol policy to ensure they understand and agree to comply with the responsible service policy. For your convenience, we have provided a sample policy that you are free to adopt in your establishment.

Please complete, sign and return this form to your agent when requesting coverage. This information must be confirmed prior to requesting coverage in order to receive the 20% credit.

I hereby certify, under penalty of insurance fraud, this establishment has implemented the steps listed above. I agree to maintain written documentation of the above items, and understand this information may be requested at any time during or after the policy period.

I have attached copies of the following:

- TABC-certification for every person involved in serving alcohol (and their managers)
- Our written policy on responsible alcohol service

Insured's signature: _____ Date: _____
(Must be signed by owner, officer or partner)

Legal and DBA names: _____