



SOUTHERN SPECIALTY UNDERWRITERS, LLC.

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# 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 \_\_\_\_\_

Banquet entertainment by applicant or lessee ☐ Number of times per week \_\_\_\_\_ or per year \_\_\_\_\_

Does the applicant ever employ bouncers, security or doormen?

☐ 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 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
3. Is the applicant affiliated with a national franchise operation? ☐ Yes ☐ No

4. Does the applicant ever sell or serve alcohol away from the premises? ☐ Yes ☐ No  
*If Off-Premises coverage is desired, attach a completed Catering Plus Supplemental Liquor Liability Application, form CP-APP, to this submission.*
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. Has the applicant had 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. Does the applicant have knowledge of any fines or citations for violation of law or ordinance related to illegal activities or the sale of alcohol at this location within the past five years? ☐ Yes ☐ No
- If yes, provide the following information on each fine or citation:
- Date(s): \_\_\_\_\_
- Description(s): \_\_\_\_\_
- Measures in place to prevent future violations: \_\_\_\_\_
11. Is the applicant requesting Liquor Liability limits greater than the General Liability limits carried? ☐ Yes ☐ No  
*As a condition of coverage, General Liability limits must be maintained at limits equal to or greater than 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 Supplemental Liquor Liability Application, form CP-APP, 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, and name applicant as an additional insured? ☐ 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. 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

**Applicant's Warranty Statement:** The undersigned represents to the best of his/her knowledge and belief that particulars and statements set forth are true and agree that those particulars and statements are material to the acceptance of the risk assumed by the Company. The undersigned further declares that any claim, incident or event taking place prior to the effective date of the insurance applied for which may render inaccurate, untrue, or incomplete any statement made will immediately be reported in writing to the Company and the Company may withdraw or modify any outstanding quotations and/or authorization or agreement to bind the insurance. The signing of the Application does not bind the undersigned to purchase the insurance, nor does the review of the Application bind the Company to issue a policy. It is understood the Company is relying on the information supplied by the applicant prior to issuing a quote. It is agreed that this Application, including any material submitted therewith, shall be the basis of the contract should a policy be issued.

**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'

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 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](http://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](http://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: \_\_\_\_\_