Badger Mutual® INSURANCE
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MINNESOTA LIQUOR LIABILITY APPLICATION SUPPLEMENT

APPLICANT OWNER OF BUILDING (LESSOR) NAME	**LICENSEE** NAME
ADDRESS	ADDRESS
TYPE OF RISK: ☐ RESTAURANT ☐ TAVERN ☐ PACKAGE STORE	ENTITY IS: ☐ CORPORATION ☐ INDIVIDUAL ☐ PARTNERSHIP ☐ SOLE PROPRIETOR ☐ OTHER _____
POLICY PERIOD: FROM_____ TO_____	
LIQUOR AUTHORITY NAME	APPLICANT IS: ☐ OWNER OF PREMISES ☐ TENANT
ADDRESS	

ENTERTAINMENT

IS ENTERTAINMENT PROVIDED? ☐ YES ☐ NO	IF YES, TYPE: ☐ LIVE ENTERTAINMENT ☐ BAND ☐ DISC JOCKEY ☐ TOPLESS ☐ JUKE BOX ☐ OTHER_____	HOW MANY DAYS PER WEEK?
IS DANCING ALLOWED? ☐ YES ☐ NO	IF YES, TYPE: ☐ ROCK AND ROLL ☐ COUNTRY WESTERN ☐ OTHER_____	
ARE THERE AMUSEMENT DEVICES? ☐ YES ☐ NO	IF YES, TYPE: ☐ VIDEO GAMES HOW MANY?_____ ☐ POOL TABLES HOW MANY?_____ ☐ OTHER_____	
DOES THE INSURED EMPLOY BOUNCERS? ☐ YES ☐ NO	IF YES, HOW MANY?	

CLAIMS HISTORY

HAS THE LICENSEE APPLICANT'S LIQUOR LICENSE EVER BEEN REVOKED OR SUSPENDED? ☐ YES ☐ NO IF YES, GIVE DETAILS BELOW.	HAS LIQUOR LIABILITY COVERAGE EVER BEEN CANCELLED OR DECLINED? ☐ YES ☐ NO IF YES, GIVE DATE, DETAILS, ETC. BELOW.

HAS THE APPLICANT OR ESTABLISHMENT HAD ANY CLAIMS OR SUITS PRESENTED, OR KNOW OF ANY INCIDENTS THAT COULD LEAD TO A CLAIM? ☐ YES ☐ NO

IF YES, GIVE FULL DETAILS OR CIRCUMSTANCES, INCLUDING PAYOUTS AND RESERVES ON EACH CLAIM.

PRIOR/CURRENT LIQUOR LIABILITY CARRIER INFORMATION — THIS SECTION MUST BE COMPLETED

FROM (MM/YY)	TO (MM/YY)	COMPANY	LIMITS	PREMIUM
				$
FROM (MM/YY)	TO (MM/YY)	COMPANY	LIMITS	PREMIUM
				$

FOOD RECEIPTS

LAST YEAR	ANTICIPATED
$	$

BEER, WINE, AND LIQUOR RECEIPTS

LAST YEAR	ANTICIPATED
$	$

LIMIT OF LIABILITY *(per person/per occurrence/aggregate)*

☐ 50/100/310 ☐ 100/100/310 ☐ 500/500/1M ☐ 1M/1M/1M *☐ 1M/1M/2M

* *Limits not available for sports bars and taverns with 50% or more liquor receipts*

HAS AGENT INSPECTED APPLICANT'S PREMISES? ☐ YES ☐ NO IF YES, CONDITION OF RISK: ☐ EXCELLENT ☐ GOOD ☐ FAIR ☐ POOR

AGENT

SIGNATURE	
AGENCY NAME/CODE	

INSURED

SIGNATURE	
TITLE	TELEPHONE