

Ashland General Agency, Inc.
CATERERS AND HALLS LIABILITY SUPPLEMENTAL
 (Complete in addition to the **Acord** General Liability Application)
 (Answer **ALL** questions - if they do not apply, indicate not applicable)

NAME (include dba / Inc. / LLC) : _____

1. Description of operations: _____

2. Number of years experience in this field: _____ Number of years in business: _____

3. Annual Payroll: _____

4. Annual Sales: Liquor Receipts - _____ Food Receipts - _____ Misc./Other Receipts - _____

5. Give percentage breakdown in the following categories:
 Parties _____% Meetings _____% Weddings _____% Conventions _____% Sporting Events _____%
 Other: _____% _____%

6. Does applicant have liquor liability? yes no
 If yes, indicate carrier: _____ Limits: _____

7. Does applicant own or lease (long term) a hall?..... yes no
 If yes, what is square footage? _____

8. Is there a parking area?..... yes no
 If yes, is area lit?... yes no

9. Does applicant provide valet parking service?..... yes no
 If yes, where is Garage Liability Coverage insured? _____

10. Does applicant hire security guards?..... yes no
 If yes, does applicant obtain certificate of insurance or is applicant named as an additional insured?

11. Total number of employees: _____

12. Does applicant have Worker' Compensation coverage in force?..... yes no

13. Does applicant lease employees?..... yes no

14. Does applicant operate a limousine service for guests?..... yes no
 If yes, who provides automobile liability coverage? _____

15. Where is food prepared?..... Commercial Kitchen Other:
 If other, please provide complete details _____

16. Does applicant package and sell food under their own label?..... yes no

17. Are health department regulations followed?..... yes no

18. How are dishes and linens cleaned and sanitized?..... yes no

19. Describe food storage procedures: _____

20. Are records kept on food suppliers?..... yes no

21. Equipment: Are any of the following used?
 Tents Space Heaters Portable restrooms Folding Chairs/tables Barricades Dance Floors
 Amusement Devises Tiki torches/live flames Grills - () electric () gas () LPG

22. Does applicant separately rent equipment to others?..... yes no
 If yes, what are the receipts? _____

This supplemental application does not bind the Applicant nor the Company to complete the insurance, but it is agreed that the information contained herein shall be part of the basis of the contract should a policy be issued. Any person who, with intent to defraud or knowing that he 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.

 Applicant's Signature Print Signee Date Producer's Signature