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| **Pub Operations Supplemental Form** |
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| 1. Establishment name: |       |
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| 2. If operated by someone other then the named insured, the following is required: |
| 1. Business name, Insurance company and policy number:
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|  |       |
| 1. Provide copy of insurance certificate with liability limit of $ 5,000,000.
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| 1. Provide copy of agreement(s).
 |
| 1. Is the named insured listed as an additional insured on the operator's policy?
 | YES |       | NO |       |
|  |
| 3. If operated by the named insured, the following is required: |
| 1. Total annual receipts:
 |
|  | Liquor |       |  |
|  | Food |       |  |
|  | Other, list |       |  |
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| 4. Hours of operation: |       |  |
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| 5. Is there a "Happy Hour"? | YES |       | NO |       |
| 1. At what time:
 |       |  |
|  What gimmick(s) is/are used to promote Happy Hour? (ie: 2 for 1 drinks, girls drink free) |
|  |
| 6. Is food served? | YES |       | NO |       |
| 1. If yes, what type of food? (ie. hamburgers, French fries, chips, peanuts)
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|  |       |  |
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| 7. Are establishment employees "Smart Serve" certified? | YES |       | NO |       |
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| 8. Is photo identification checked at the door prior to entering the establishment? | YES |       | NO |       |
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| 9. Is there a sign posted stating that patrons/customers must be of legal drinking age  | YES |       | NO |       |
| to enter the establishment? |  |
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| 10. Is there a policy "not to serve alcohol to intoxicated patrons/customers"? | YES |       | NO |       |
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| 11. Are there written guidelines to follow when patrons/customers become intoxicated | YES |       | NO |       |
| and/or disruptive? |
| 1. Attach a copy of the written guidelines.
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| 12. How are obviously intoxicated patrons/customers discouraged from driving? |
|       |
|       |
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| 13. Does the establishment provide a "Transportation Service" to the patrons/customers? | YES |       | NO |       |
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| 14. Does the establishment offer free pop and/or coffee to "Designated Drivers"? | YES |       | NO |       |
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| 15. List the entertainment scheduled for the calendar year. |
|       |
|       |
|       |
|  |
| 16. Attach a copy of the establishments liquor permit. |
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