

# LIABILITY FOR SERVERS/CATERERS/MOBILE BARTENDING

## CLIENT SUBMISSION

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Fax/ e-mail of this application must be received by our office a minimum of one day prior to the Effective Date.  
Coverage is NOT bound until written confirmation from PAL has been issued.

This application is NOT INTENDED for servers/caterers/mobile bartenders who are organizing/hosting an event. The event host MUST carry a separate event liability policy.

Name of Insured: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Website: \_\_\_\_\_

Additional Insured(s): \_\_\_\_\_

Coverage required for:  1 event only  Annual term

**Effective Date:** \_\_\_\_\_ **(12:01AM) (MM/DD/YY)** **Expiry Date:** \_\_\_\_\_ **(12:01AM) (MM/DD/YY)**

Event location: (if coverage for 1 event only is required) \_\_\_\_\_

Address: \_\_\_\_\_

Estimated # of events per year: \_\_\_\_\_ Typical type of event catered: \_\_\_\_\_

Estimated gross receipts/event: \$ \_\_\_\_\_ Total annual receipts: \$ \_\_\_\_\_

% Of receipts split - Food sales: \_\_\_\_\_ % Liquor sales: \_\_\_\_\_ %

Total of receipts split must equal 100%

\*Do you hold or take out the liquor license or purchase / supply any alcohol?  Yes  No

\*Do you cook/prepare food (ie. caterer)?  Yes  No

\*Do you serve or handle food but don't cook/prepare (ie. food server only)?  Yes  No

\*Do you bring any supplies with you (cooking equipment/trailer/cart/table or garnishes)?  Yes  No

\*Do you require Liquor Liability Coverage?  Yes  No

\*Do you require Commercial General Liability (CGL) Coverage?  Yes  No

If handling alcohol, please confirm all alcohol-serving personnel are certified in a formal alcohol training course (Smart Serve, Serve it Right, etc) by listing their names and certificate numbers below:

| Server Name: | Certificate Number: | Server Name: | Certificate Number: |
|--------------|---------------------|--------------|---------------------|
| 1            |                     | 6            |                     |
| 2            |                     | 7            |                     |
| 3            |                     | 8            |                     |
| 4            |                     | 9            |                     |
| 5            |                     | 10           |                     |

Should the association consist of more than ten (10) servers, please attach complete list of names and certificate numbers for quotation. ALL servers MUST BE fully trained.

\*Is the alcohol always served under a valid liquor license or permit?  Yes

\*If you can't answer yes, please provide details in the general comments section below.

Coverage is only for service of alcohol by the Name Insured at

- 3rd party LIQUOR LICENSED PRIVATE RECEPTION EVENTS ONLY OR
- 3rd party PRIVATE RECEPTION EVENTS ON PRIVATE PROPERTY (IE) WEDDINGS , BIRTHDAYS (OVER AGE OF 25), FAMILY REUNIONS, FAMILY ANNIVERSARIES, ENGAGEMENT PARTIES, RETIREMENT PARTIES, BABY SHOWERS, BRIDAL SHOWERS

Please contact your PAL Insurance broker if operations are taking place on private property and not listed above. Exceptions may be approved.

If operations at public event (eg festival, concert, beer garden), approval by PAL Underwriter is required.

Excluded locations: house parties (other than above), university, college, and nightclub.

Coverage is not provided for the event itself nor any events hosted by the Name Insured.

Do you ever provide security, bouncer or door personnel?  Yes  No

\*\*Do you ever hire subcontractors?  Yes  No

\*\*All subcontractors are required to carry liability coverage.

If handling, serving or preparing food:

\*Confirm that kitchen staff have a food handler certificate?  Yes  No

Where is the food prepared?  Commercial Kitchen(inspected)  At the event Premise  Other

\*\*\*Food preparation locations must be equipped to meet local fire safety regulations.

If 'other', please provide details: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please provide description of type of food typically served: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If using a Commercial Kitchen, does liability insurance coverage need to be extended to the Commercial Kitchen?  Yes  No

If yes, please provide the name and address of the commercial kitchen: \_\_\_\_\_  
\_\_\_\_\_

How many hours a week are you using Commercial Kitchen? (ANNUAL TERM ONLY) \_\_\_\_\_

Previous experience in food/beverage industry (years): \_\_\_\_\_

Does the Insured's operations involve the use of a food/beverage truck or trailer?  Yes  No

If Yes, is the use of truck or trailer outdoor only?  Yes  No

If set up indoor, do you use a propane tank, any device with open flames or deep fryer?  Yes  No

Is there proper safety and fire extinguishing apparatus for what they are cooking and preparing?  Yes  No

Has the truck/trailer been inspected and approved by the local health and safety board?  Yes  No

Is the truck or trailer attended by the Insured and not left unattended at events?  Yes  No

If a truck, does the truck have automobile liability coverage in place?  Yes  No

If a trailer, when it is not attached to a vehicle,  
is there a pin lock on the trailer tongue/hitch and wheel locks?  Yes  No

Limit of Liability:  \$1,000,000.00  \$2,000,000.00  \$3,000,000.00  \$4,000,000.00  \$5,000,000.00

Has any insurance company declined or cancelled coverage?  Yes  No

Loss history:

\_\_\_\_\_  
\_\_\_\_\_

General comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

APPLICANT: \_\_\_\_\_

Address: \_\_\_\_\_

City, Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_