



SPECIAL OCCASION HOST LIQUOR LIABILITY APPLICATION

1. Name of Applicant/Permit Holder:
2. Mailing Address:
3. Contact Name:
Phone No.: _____ Email Address: _____
4. Describe Event/Activity:

Parish and Location: _____
5. Policy Period starts one hour before events (function)
From - Date: _____ Time: _____ AM PM
Expiry - Date: _____ Time: _____ AM PM
8. Who is designated to handle the following:
 - A. Impaired patrons who arrive at your function _____
 - B. Patrons who have become visibly impaired at your function _____
 - C. Patrons who fight _____
 - D. Patrons who become disruptive and abusive _____
 - E. Patrons who are obviously impaired _____
7. If third party responsible for liquor, confirm there is legal liability policy in force and a certificate issued with the applicant named as additional insured. _____
8. What is your experience producing this type of event. _____
9. Liquor License Board permit No. and capacity applied for (# of patrons): _____
Rate: _____ Coverage for more than one day add 25% of premium per day
1-250 people: \$100 plus PST
251 + people : Contact Hub International for premium

Rate: _____ = \$ _____ X 1.08 (PST) = Total Amount Due: \$ _____

Please note that this is an application only. It does not constitute an insurance policy. Insurance shall become effective only when confirmed by Hub Insurance. Quotations will be based upon the information provided and applicant warrants information provided.

Applicant Signature: _____ **Position:** _____
Please Print Name: _____ **Date:** _____

In the event of a claim please contact Hub International - Ottawa at 613-730-1800 or Robert Fournier at 613-903-7486, or Alexandre Blais at 613-903-7478