



▼ DONALD GADDIS CO., INC.

WHOLESALE INSURANCE BROKERAGE

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(312)853-0071 | www.gaddiscompany.com



APPLICATION FOR ILLINOIS LIQUOR LAW LIABILITY

AGENCY (NAME/PHONE NUMBER): _____

EFFECTIVE DATE: _____ LIMIT REQUIRED: _____

LICENSEE:

LOCATION ADDRESS/COUNTY: _____

MAILING ADDRESS: _____

PREMISES OWNER: _____

MAILING ADDRESS: _____

CLASSIFICATION (bar, restaurant, club, store, hall/caterer – if other, please describe): _____

ANNUAL RECEIPTS (provide breakdown of liquor/food/package): _____

ANY RECEIPTS GENERATED FROM INTERNET OR CATALOG SALES? YES / NO
IF YES, PLEASE PROVIDE DETAILS/SALES ON A SEPARATE SHEET.

LICENSED CLOSING TIME:

ACTUAL CLOSING TIME: _____

ENTERTAINMENT (live music, DJ, dance floor, pool tables, etc.): _____

SQUARE FOOTAGE: _____

SECURITY INFORMATION (# OF BOUNCERS/DOORMEN): _____

NUMBER OF YEARS AT THIS LOCATION: _____

PRIOR CARRIER/PREMIUM: _____

HAVE THERE BEEN ANY CLAIMS IN THE LAST 3 YEARS? YES / NO
IF YES, PLEASE PROVIDE UPDATED LOSS RUNS & FULL CLAIM DETAILS.

HAS ANY COMPANY EVER CANCELLED OR NON-RENEWED? YES / NO
IF YES, PLEASE PROVIDE COMPLETE DETAILS ON SEPARATE SHEET.

IS COMMON LAW COVERAGE FOR OUT-OF-STATE CLAIMS DESIRED? YES / NO

SIGNATURE OF INSURED: _____ DATE: _____