

LIABILITY FOR CATERERS

CLIENT SUBMISSION

2 Norfolk Street South, Simcoe, ON N3Y 2V9
T: 1-800-265-8098 F: 519-428-5661
E: ontario@palcanada.com
www.palcanada.com



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 caterers 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: _____ **(MM/DD/YY)** **Expiry Date:** _____ **(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: _____ %

*Confirm that kitchen staff have a food handler certificate: Yes

*Confirm that all alcohol-serving employees are certified in a formal alcohol training course (Smart Serve, Serve it right...) Yes

*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.

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.

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: _____

Caterer Liability ~ Client Submission

For the purposes of the Insurance Companies Act (Canada), this document was issued in the course of Lloyd's Underwriters' insurance business in Canada.

Please provide description of type of food typically served: _____

Previous experience in food/beverage industry (years): _____

Limit of Liability: \$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: _____

Caterer Liability ~ Client Submission