IAT Group_____

Special Products Division
PO Box 3328
Omaha, NE 68103

_____Acceptance Indemnity Insurance Company
_____Acceptance Casualty Insurance Company
_____Occidental Fire & Casualty Insurance Company
_____Wilshire Insurance Company

ADDENDUM
CATERING SUPPLEMENTARY INFORMATION

Applicant: _____

1. Type of activities catered:

_____ Business Meetings **_____ Sport Events**
_____ Fundraisers **_____ Anniversary Parties**
_____ Benefit Dances **_____ Funeral Dinners**
_____ Wedding Receptions – Number per year _____
_____ Other (Describe) _____

2. On – Premises Operations: _____ YES _____ NO
Alcohol Receipts $_____
Food Receipts $_____
Are these amounts included in your annual alcohol and food receipts listed in the Annual Gross Receipts section of the Liquor Liability Application or is this in addition to that amount?
_____ Included _____ In Addition

3. Off - Premises Operations: _____ YES _____ NO
Alcohol Receipts $_____
Food Receipts $_____
Are these amounts included in your annual alcohol and food receipts listed in the Annual Gross Receipts section of the Liquor Liability Application or is this in addition to that amount?
_____ Included _____ In Addition

4. Does our Insured supply the bartenders at all times? _____ YES _____ NO

5. Does our Insured supply the alcohol at all times? _____ YES _____ NO

6. Are all events cash bar? _____ YES _____ NO

_____ _____
Applicants Signature **Date**

_____ _____ _____
Agency **Title** **Date**

_____ _____
Signature/Broker **Address**

_____
City, State & Zip