**GENERAL LIABILITY INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| Limits Requested |  |  |  |
|  Each Occurrence | $      |  |  |
|  Aggregate Limit | $      |  |  |
|  Damage to Rented Prem | $      |  |  |
|  Med Pay Limit | $      |  |  |
|  |  |  |  |
| GL Deductible? | [ ]  Yes [ ] No | If Yes, Amount: $      |  |
|  |  |  |  |
| Gross Annual Sales | $      |  |  |
|  Food/Liquor Breakdown | [ ]  Not Applicable | Food $      Liquor $      |  |
|  |  |  |  |
| Employee Payroll | $      | Number of Employees  | FT      PT      |
|  |  |  |  |
| Square Feet Occupied |        |  |  |
|  |  |  |  |
| Data Breach/Cyber Exp |  [ ]  Yes [ ] No | If yes, complete application |  |
| Professional Liability |  [ ]  Yes [ ] No | If yes, complete application |  |
| Hired/Nonowned Auto |  [ ]  Yes [ ] No |  |  |

|  |  |  |
| --- | --- | --- |
| Additional Interests? |  [ ]  Yes [ ] No | Relationship to Insd:       |
|  |  |  |
| Special Endorsements Needed? (i.e. 30 day cancellation, primary & non-contributory, WOS) |  [ ]  Yes [ ] No | If yes, List:       |

|  |
| --- |
| **UMBRELLA/EXCESS LIABILITY INFORMATION** |

|  |  |  |  |
| --- | --- | --- | --- |
| Liability limit: |  | [ ]  Umbrella | [ ]  Excess |
|  Each Occurrence | $       |  |  |
|  Aggregate Limit | $       |  |  |
|  Retained Limit | $       |  |  |
|  |  |  |  |
| Include as Underlying: | [ ]  General Liability | [ ]  Automobile Liability | [ ]  Workers Comp |
|  | [ ]  Professional Liab | [ ]  EBL | [ ]  Other Liability |
|  |  |  |  Describe:       |