



PARTY ALCOHOL LIABILITY Self Serve application

2 Norfolk St. South, Simcoe, On N3Y 2V9
Tel (519) 428-7716 • Toll Free 1-800-265-8098 • Fax (519) 428-5661

www.palcanada.com

Liquor permit must be ISSUED before function. Application **MUST MATCH** the liquor permit. **NO BYOB.**
If the event is taking place at a private residence, please complete our **Liquor Only application for Private Residence Events.**

Name and Address of Permit holder (Person Responsible) Postal Code: Phone Number:	Type of Function Minors allowed: Yes <input type="checkbox"/> No <input type="checkbox"/> SOME RESTRICTIONS MAY APPLY	Name and Address of Insured: Additional Insured:
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Date of Function: _____ (DD/MM/YYYY) Number of People at Function _____ (Must match permit)

Name of location of event _____
Address of location _____

Policy period

Policy period starts one hour before time shown on liquor permit and expires at the end of function.

Effective date: _____ (DD/MM/YYYY) Time: _____ A.M. P.M Expiry date: _____ (DD/MM/YYYY) Time: _____ A.M. P.M

	COVERAGES	LIMIT OF LIABILITY	DEDUCTIBLE
Inclusive Limit	a. Commercial General Liability Including Liquor Extension and Premises. b. Non-owned auto coverage c. Tenant Legal Liability \$500,000.00 Limit	\$ <input style="width: 40px; height: 20px;" type="text"/> ,000,000.00 { Bodily injury each occurrence property damage each accident Aggregate	\$ 500.00

Please indicate liability limit in above box. Liability limits of 1, 2, 3, 4, or 5 million available.

Applicant name: _____

Mailing address: _____

Postal Code: _____

Phone No.: _____ E-mail Address: _____

Applicant's **SIGNATURE** _____

Application, liquor permit and full payment must be received by our office one hour (minimum), prior to function commencement.

Make sure to include all necessary information as changes after policy issuance will be subject to a fee. Please check your rental agreement for any specific requirements from your venue.