

Signature Craft Renewal Application Form

Name of Craft Brewery/Distillery:	
Renewal Date:	Policy #: SCB

1. Has the Management or Ownership changed in the past 12 months? Yes No
 If Yes, please explain: _____
2. Did you have any changes in operations in the past year? Yes No
3. Do you have any new market initiatives or construction planned in the next year? Yes No
 If Yes, please describe: _____
4. Are you aware of any claims or incidents that may lead to a claim? Yes No

REVENUES - Annual Gross Revenues:	
Sales - Wholesale (LCBO, SAQ, LCBC)	\$ _____
Sales - Onsite Sales	\$ _____
Sales - Direct to Restaurants	\$ _____
Sales - Exports to the United States	\$ _____
Sales - Exports Outside North America	\$ _____
Corporate Event Rentals	\$ _____
Food Operations	\$ _____
Other (describe): _____	\$ _____
Total Revenues	\$ _____

OTHER REQUIRED INFORMATION
1. Please Provide an Updated Signed Statement of Values.
2. Please Provide an Updated Profits Worksheet.
3. Please Provide an Updated List of Loss Payees and Additional Insureds.

DECLARATIONS
1. The information provided in this application is true and correct and I/we have not withheld any relevant information.
2. I/We understand that any statement made in this application will be treated as a statement made by all of the people to be insured.

Signature of Applicant: _____ Date: _____
