

# SPECIAL EVENT LIABILITY COVERAGE

*Fax/Mail Special Event Information to  
Baker, Romero & Associates Insurance Brokers, Inc.  
750 Terrado Plaza, Ste 238  
Covina, Ca. 91723  
Fax 626 339-9921  
Ph# 626 332-2258 or  
lillian@bakerromero.com*

Name of Insured: \_\_\_\_\_

"Name" of Special Event: \_\_\_\_\_

Date of event: \_\_\_\_\_

Time event will take place: \_\_\_\_\_ AM/PM

Contact of Person Responsible: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Location of events (s)-Attach advertisement or brochure):

Additional Insured – Name and Address:

Describe Security Protection: \_\_\_\_\_

# of Attendees: \_\_\_\_\_ Estimate Gross Receipts \$ \_\_\_\_\_

Will liquor be served or sold? Explain:

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