

Small Business Restaurant Supplemental Questionnaire

Named Insured

SMALL BUSINESS ELIGIBILITY GUIDELINES

Maximum Exposure	Required Property Maintenance	Ineligible Characteristics
? \$5 Million total property (TIV) per location ? \$25 Million TIV per account	? Automatic extinguishing system serviced at least every six months by an independent contractor	? Fast food operations ? Pizza with delivery ? Residential delivery by employees ? Bars, taverns, night clubs, lounges ? Entertainment is primary attraction
? \$5 Million in sales per location and ? Maximum 5 locations	? Hood, duct and flue cleaned at least every six months by an independent contractor	? Three or fewer years experience as a restaurant owner or manager
? Liquor receipts 40% or less of combined food and liquor sales	? For buildings between 21 and 45 years old, major building systems (electrical, roof, HVAC, plumbing) physically updated within the last 20 years	? Protection class 8, 9, 10 ? Buildings 45 years old or older unless "adequate" per Fireman's Fund loss control inspection prior to binding

A separate questionnaire must be completed for EACH location.

Type:

Location # of

Address:

- ☐ Upscale
☐ Casual Dining
☐ Themed
☐ Pizza
☐ Ice Cream / Beverage Shop
☐ Cafeteria / Buffet
☐ Institutional Food Service
☐ Catering
☐ Quick Service (no table service)
☐ Other

Total food receipts at this location: \$

Total liquor receipts at this location: \$

Hours of operation - restaurant: am/pm to am/pm

Hours of operation - bar/lounge: am/pm to am/pm ☐ N/A

Years management experience of owner/general manager:

Yes No

☐ ☐ Are deliveries made? ☐ Residential ☐ Business to business

If yes: Yes No

☐ ☐ Delivery associated with catering operations only?

☐ ☐ Delivery by employees? ☐ owned vehicles ☐ non owned vehicles

☐ ☐ Delivery by third-party vendor(s)?

Do all contracts include hold harmless wording in the applicant's favor and are certificates of insurance received? ☐ Yes ☐ No

Total receipts from off-site catering \$ or ☐ N/A

☐ ☐ In-home catering? Total receipts \$

If yes: Yes No

☐ ☐ Are the applicant and all employees bonded for theft?

☐ ☐ Are criminal background checks performed on all employees performing in-home catering?

☐ ☐ Do any employees use their own vehicles on company business on average one or more times a week?

If yes, explain

☐ ☐ Is valet parking service provided? If yes, by whom? ☐ Applicant ☐ Third party

☐ ☐ Are hold harmless agreements in applicant's favor and certificates of insurance naming applicant as additional insured obtained for all independent contractors or vendors? If no, explain

Kitchen Facilities:

Yes No

☐ ☐

Does an outside firm clean hoods and ducts?

If yes, frequency of service: ☐ Quarterly ☐ Semiannually ☐ Annually☐ ☐Does a UL 300-approved automatic extinguishing system cover all cooking surfaces?

If no, explain exceptions

☐ ☐

Is the automatic extinguishing system under a service maintenance contract by an outside firm?

If yes, frequency of service: ☐ Quarterly ☐ Semiannually ☐ AnnuallyHow often are hood filters cleaned? ☐ Daily ☐ Weekly ☐ As needed, more frequently than weekly ☐ Less frequently than weekly**Liquor Liability (if applicable)** ☐ **N/A**

Yes No

☐ ☐

Is a food menu available during all hours of liquor service?

☐ ☐

Has applicant had any reported liquor liability claims or notification of potential liquor liability claims in the last five years? If yes, explain

☐ ☐

Has applicant's liquor liability coverage ever been cancelled or nonrenewed?

If yes, explain

☐ ☐

Has the applicant had any fines, citations, or license suspensions or revocations for violations of liquor sales laws or ordinances? If yes, explain

☐ ☐

Are all servers certified in a formal alcohol training course (e.g., TIPS, TAM, RAMP, BEST, etc.)?

☐ ☐In addition to use of a certified alcohol training course, does applicant have a written policy for serving alcohol?☐ ☐

Does management review this written policy with servers on a regular basis?

☐ ☐

Is there a stand-alone bar/cocktail lounge unconnected to a restaurant?

If yes, explain

☐ ☐

Does applicant have any alcohol consumption promotions/happy hours? If yes, describe the promotions and how consumption quantities are controlled

☐ ☐

Does applicant provide entertainment, dancing, live bands, a DJ, or amusement devices?

If yes, describe

☐ ☐

Does applicant use any on-site security or bouncers?

If yes, explain

Money and Securities (Complete only for money and securities coverage)

Yes No

☐ ☐

Does the insured maintain a cash register and records of daily receipts?

☐ ☐

Are deposit records kept on premises?

☐ ☐

Are daily bank deposits made?

If no, how often are bank deposits made?

☐ ☐

Is money stored in a class B safe or better while on premises?