

BUSINESSOWNERS QUOTE WORKSHEET: RETAIL

GuideOne does not write Retail risks in Harris and Montgomery Counties, TX.

The following questions are intended to be used as a guide for quoting a Retail prospect on our Businessowners policy (BOP). The order follows the flow of questions in our online quoting portal (GO BOP). Please contact the BOP underwriting team with any questions: smallbiz@guideone.com

Appetite Questions:

The answers to the below determine eligibility for a BOP.

Is any building greater than 50% vacant? Yes No

Is Building coverage needed? Yes No If yes, percentage of the building owner occupied? _____

Are any buildings designated as historical landmarks? Yes No

Number of losses in the last 3 years: _____

Maximum property value (Building and Contents) at a single location *(Please note: Our protection class integration doesn't run until later in the quoting process. If you know the Retailer is in a protection class 10 or 10W, and the maximum property value is >\$1.5M, it isn't eligible for a BOP):* _____

Number of locations: _____

Number of employees (Definition of FTE: Full Time + Part Time/2 rounded up to whole number): _____

Maximum annual gross sales at a single location: _____

Square footage of the largest building (Do not add the square footage of individual buildings together): _____

Business Information:

Business Name: _____

Primary Business Location: _____

Entity Type: _____

Year Started: _____

FEIN (**Optional**): _____

Website Address (**Optional**): _____

Primary Contact Name (**Optional**, but will be required to issue the policy): _____

Primary Contact Phone Number (**Optional**, but will be required to issue the policy): _____



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Primary Contact Email Address (**Optional**, but will be required to issue the policy):

If the applicant has more than one location, you will need the address for each location:

Does the applicant wish to insure any business operations not contemplated in the primary classification; if so, you will need to include a classification description for each (GO BOP has a search function to select from)? Yes No If yes, please specify: _____

Qualification Questions:

Are the retail operations considered seasonal (facility is closed for three or more months)? Yes No

Is the applicants' business open past 12AM (midnight)? Yes No

Does the applicant sell alcohol on the premises? Yes No

Is the applicants' percentage of Liquor Sales greater than 35% of their total sales? (**Asked only if answer to question 'Does the applicant sell alcohol on the premises' = Yes**) Yes No

Does the applicant allow Patrons to bring alcohol onto the premises for consumption (BYOB Establishment)? (**Asked only if answer to question 'Does the applicant sell alcohol on the premises' = No**) Yes No

Are products purchases directly from suppliers outside the United States? (**Asked for Mail Order Houses only**) Yes No

Does the applicant fill propane tank cylinders? (**Asked for Home Improvement Stores only**) Yes No

Does the applicant sell gun powder? (**Asked for Sporting Goods Stores only**) Yes No

Does the applicant sell reconditioned equipment? (**Asked for Hardware and Tools, Sporting Goods Stores only**) Yes No

Does the applicant rent hardware equipment and/or tools to others? (**Asked for Hardware and Tools only**) Yes No

Does the applicant sell baby furniture? (**Asked for Furniture Stores only**) Yes No

Does the applicant offer furniture assembly? (**Asked for Furniture Stores only**) Yes No



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Does the applicant do any of the following: Offer check-cashing or money transfers; or Sell cell phones? **[Asked for Delicatessens – Retail Store (No cooking) only. Delicatessens with cooking are a Restaurant classification]** Yes No

Does the applicant have a Formal Safety Program in place that includes training on robberies? **[Asked for Delicatessens – Retail Store (No cooking) only. Delicatessens with cooking are a Restaurant classification]** Yes No

Does the applicant offer emergency roadside services for other than their own customers? **(Asked for Tire Dealers, Auto Parts and Supplies only)** Yes No

Does the applicant sell or provide any of the following: Retreaded or recapped tires; Products purchased directly from suppliers outside the United States; Critical Auto Parts? **(Asked for Tire Dealers, Auto Parts and Supplies only)** Yes No

Does the applicant own or sponsor a car, truck or other vehicle used for racing? **(Asked for Tire Dealers, Auto Parts and Supplies only)** Yes No

Does the applicant publish any newspapers, periodicals or books? **(Asked for Bookbinding and Printing Supplies only)** Yes No

Does the applicant sell, store, dispense, process or distribute marijuana/cannabis products, oil or paraphernalia on your premises for recreational and/or medicinal purposes? Yes No

Does the applicant operate out of a residence? Yes No

Is greater than 60% of the applicant's sales derived from internet sales? Yes No

Does the applicant rent, sell, supply or distribute materials of a pornographic nature? **(Asked for Video Stores, Book and Magazine Stores, Bookbinding and Printing Supplies, Camera Stores, Catalog or Premium Coupon Redemption Stores, Variety Stores only)** Yes No



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You need to know what coverage the applicant wishes to include in order to complete the remainder of the quote. Coverages are added on the Policy Information, Location, and Building pages.

Policy Information:

What pay plan was the applicant on with their prior carrier (Monthly, Quarterly, Semi-Annual or Annual)? _____

If you indicated the applicant had losses in the last 3 years, you will need the following details for each loss:

Loss Date: _____

Loss Type (Liability, Property – Weather, or Property – All Other): _____

Total Incurred: _____

The below are policy level underwriting questions. Some coverages you add can result in additional underwriting questions:

Is there a formal safety program in operation? Yes No If yes, you will be required to pick one of the following: Written safety manual or program; Safety director or risk manager; Regularly scheduled safety meetings with training; or Other. If yes, please specify: _____

Does the applicant have a commercial cooking exposure? Yes No

Does the applicant host any special events such as: Fund-raiser, Picnics, Parades, Carnivals, Specialty Shows, Paint Nights, etc.? Yes No

Does the applicant own or operate any business not included on this application? Yes No

Does the applicant sponsor any athletic teams? Yes No

Is the expiring carrier GuideOne? Yes No

Location Information:

You will need the below for each location on the policy:

Feet to water source/hydrant: _____

Property Deductible: _____

Some coverages you add on the 'Location' result in underwriting questions being asked.



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Building Information:

We hope to prefill much of the building information for you through our integrations with 3rd party data sources. However, we advise you obtain the below just in case our integrations do not return all of the needed information. You will need the below for each building on the policy:

Building Construction Type: _____

Is there an automatic sprinkler system? Yes No

Business Personal Property Limit (A minimum of \$5,000 is required): _____

If the applicant needs building coverage, you will need the below for each building they need coverage on (we hope to prefill this information for you as well):

Percentage Owner Occupied: _____

Year Built: _____

Number of Stories: _____

Total Building Area: _____

Roof Type: _____

Year of last roof replacement: _____

Roof Area (**Optional**, and defaults to 'Unknown' if our integration doesn't return): _____

Roof Slope (**Optional**, and defaults to 'Unknown' if our integration doesn't return): _____

Roof Shape (**Optional**, and defaults to 'Unknown' if our integration doesn't return): _____

Year Wiring Updated (**Optional**; if you do not provide when quoting, and the building is >70 years old, you must provide to Underwriting prior to binding): _____

Year Plumbing Updated (**Optional**; if you do not provide when quoting, and the building is >70 years old, you must provide to Underwriting prior to binding): _____

Year Heating Updated (**Optional**; if you do not provide when quoting, and the building is >70 years old, you must provide to Underwriting prior to binding): _____

Building Limit: _____



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Building Valuation (We default to Replacement Cost, but Actual Cash Value is an option for selection): _____

Classification Square Footage: _____

The below are building level underwriting questions. Some coverages you add on the 'Building' page result in underwriting questions being asked.

Does the applicant have mechanical rides (other than for sale)? Yes No

Does the applicant have more than two amusement devices such as video games, pinball machines, or other similar devices (other than for sale)? Yes No

Does the applicant have pool tables, table tennis, or other play equipment (other than for sale)? Yes No

Blanket, Additional Named Insured, Additional Interest Information:

If applicable, you add blanket coverage on the this page.

If adding Additional Named Insureds, you need to identify if they are a company or person.

If a company, you need: Organization Type; Company Name; Company Address; and Description of operations.

If a person, you need: Name; Address; and Description of operations.

If adding Additional Interests, you need to identify if they are a Loss Payable or Mortgagee. For both, you need to identify if they are a company or person.

If a loss payable, you need: Name; Address; Contract Number; Description of Property; Applicable Clause; and Building for which the additional interest details are applicable.

If a mortgagee, you need: Name; Address; Loan Number; and Building for which the additional interest details are applicable.

Quote and Payment:

On the quote page, you select 'Final UW Review and Purchase' once you are satisfied with the quote. If underwriting review is required, a message appears to advise you of this. If not, you are taken to the Payment page to provide the billing information. If selecting a Monthly payment plan, you need the account information for the draft.

We default to electronic signature for the application and delivery of policy documents. You may change if the applicant doesn't wish to have this option; however, you are then responsible to obtain the application signatures.

Our CLUE (automated loss runs) integration runs when you select 'Complete Purchase'. If there is a variance between the loss information you entered and what our integration returns for loss runs, we will automatically refer the quote to underwriting. You will be contacted as soon as the quote is available for purchase. Otherwise, the policy is issued and your policy documents are available to view.



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Some of the coverages you select will populate underwriting questions to determine coverage and/or limit availability.

Cyber Suite:

Limit >=\$100,000 Selected:

Has your organization suffered a breach of personal information in the last 12 months? (If 'yes', only eligible for \$50,000 limit) Yes No

Do you conduct background screens for prospective employees? (If 'no' to both this and question below, only eligible for \$50,000 limit) Yes No

Is there a posted document retention/destruction policy in place? Yes No

Limit >=\$250,000 Selected (Questions for \$100,000 limit must be answered as well):

Do you maintain regularly updated computer security measures (e.g. firewall, secured wireless connectivity, virus protection)? Yes No

Are your employee, customer, and other physical records maintained in a secure environment with limited access? Yes No

Limit >=\$500,000 Selected (Questions for \$100,000 and \$250,000 limits must be answered as well):

Is access to personal information and/or third-party confidential information restricted by job position? Yes No

Is there a Chief Information and/or Chief Security Officer (or equivalent)? Yes No

Do you have a comprehensive Information Security and Privacy Policy addressing such items as use of email (including size limitations, etc.)? Yes No

Do you provide regular security training/information to all people who have access to personally identifying information, whether in paper or electronic format? Yes No

Are all users issued unique IDs and passwords when connecting to or accessing the internal network and do passwords require periodic changes, minimum length and mixed case, letters, numbers and special characters? Yes No

Do you backup computer data and store it off site? Yes No

Do you use encryption techniques for secure communications and the transfer of confidential information? Yes No



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Employment Practices Liability Insurance:

Years of continuous operation under same ownership? _____

Does the applicant have any open EPL claims, suit or complaints, or are there any pending against the applicant or any executive, officer or owner? Yes No

Does the applicant or any executive, officer, or owner have any knowledge or information of any act, error, or omission which could reasonably be expected to give rise to an EPL claim, suit or complaint? Yes No

Are all applicants required to complete and sign an employment application? Yes No

In the past 12 months, have there been any layoffs or reductions in force totaling more than 15% of the total employee count, or are any expected in the coming 12 months? Yes No

Equipment Breakdown:

Does the applicant use alternative energy sources such as solar panels or wind turbines? Yes No

Hired & Non-Owned Auto:

Does the applicant have owned autos or require Garage-keepers coverage? Yes No

Does the applicant rent, lease or loan vehicles to their customers? Yes No

Liquor Liability:

You will need the below for each location where liquor liability is added.

Has the applicant had any Liquor Liability violations in the last 5 years? Yes No

Does the applicant have a liquor license for this location? Yes No

Does the applicant have a formal carding procedure in place? Yes No

Total Sales at Location: _____

Total Liquor Sales at Location: _____

Frequency of Happy Hour Specials (You will pick one of the following: N/A; 1-7 Hours; 8-14 Hours; More than 14) _____

Type of Alcohol Sold (You will pick one of the following: Beer; Wine; Liquor) _____



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Wine List Pricing *(when Wine selected above, you will pick one of the following: Under \$15 per bottle; \$15-\$45 per bottle; More than \$45 per bottle)* _____

Percent of Alcohol Sales Derived from Off-site Catering *(You will pick one of the following: N/A; 10% or Less; 11-25%; More than 25%)* _____

Percent of Total Food/Alcohol Sales from Party/Keg Trucks *(You will pick one of the following: N/A; 10% or Less; 11-25%; More than 25%)* _____

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