



## RESTAURANT QUESTIONNAIRE

Named Insured: \_\_\_\_\_

Website Address: \_\_\_\_\_

1. Number of years in business under the same ownership? \_\_\_\_\_

2. Is this a franchise-owned restaurant? Yes \_\_\_\_\_ No \_\_\_\_\_

3. Cooking protection:

	Yes	No
UL 300 Automatic Extinguishing System (AES) in place?		
Automatic fuel shut-off if AES activates?		
Manual pull switch for AES away from equipment, in exit path?		
Contract for AES inspection/service every 6 months?		
Contract for exhaust hood and duct cleaning quarterly? Or semi-annual? Other?		
Filters in exhaust hood cleaned daily?		
Automatic high temperature control on deep fat fryer?		
Portable class K fire extinguisher in kitchen?		

4. Check any of the following exposures:

Tablesides cooking	Seasonal operation
Buffet	Outdoor seating area
Fast food or similar counter service	Raised seating areas
Diner or 24-hour operation	Live entertainment or DJ
Drive-through window	Host or sponsor special events
Food delivery	Boat dock or slips
Off-premises catering	Valet parking
Banquet rooms	Candles
Interior stairs leading to bathrooms or seating area	Apartment
Solid fuel cooking (e.g., charcoal, wood)?	Closing hours beyond 11:00PM
Micro-brew or brew pub	

		Yes	No
5.	List year of last updates to the following building systems: Electrical? _____ Plumbing? _____ HVAC? _____ Roof? _____		
6.	Central station monitored burglar alarm?		
7.	Central station monitored fire alarm?		
8.	Are there any interior or exterior recreational exposures such as pool table, shuffleboard, volleyball, bocce court? If Yes, please describe: _____ _____		
9.	If providing building coverage, is building one story or multi-story building?		
10.	If multi-story, how many floors? _____		
11.	Is there a bar area? If Yes, number of seats: _____		
12.	Any sponsorship of sports teams or special events? If Yes, explain: _____ _____		
13.	If you are you not licensed to sell liquor, do you allow customers to bring their own alcohol, i.e., BYOB?		
14.	Refrigeration and freezer units on maintenance contract?		
15.	If Liquor Law Liability coverage is requested, please complete the following Sections a. through g.:		
	a. Annual receipts from the sale of alcoholic beverages \$ _____		
	b. Has liquor license ever been revoked or suspended? If Yes, explain: _____ _____		
	c. Have you had any alcohol-related liability claims in the past 5 years?		
	d. Are all bartenders and servers required to complete Training of Intervention Procedures by Servers (TIPS) course, or a comparable program?		
	e. Are there any drink incentives, for example happy hour, "two-for-one" or ladies night? If Yes, describe: _____ _____		
	f. Do you sell or serve powdered alcohol?		
	g. Are employees allowed to drink alcohol after their shift has ended?		