

# Restaurant BOP Application

## Basic Information

<b>Legal Name</b>	<b>Doing Business As (Optional)</b>

<b>Requested Effective Date:</b>

## Contact and Business Information

<b>Name</b>	<b>Email</b>
<b>Phone Number</b>	<b>Business Address</b>
<b>Business Ownership Structure</b>	<b>Mailing Address (if different than business)</b>



## Underwriting Information

<b>Full-time employees</b>	<b>Part-time employees</b>
<b>Year Business Started</b>	<b>Average hours open daily</b>
<b>Maximum Occupancy</b>	

<b>Classification Description</b>	
Fast Food Restaurants (Commercial Cooking, No Table Service)	
Casual Dining (Commercial Cooking, Table Service)	
Fine Dining Restaurant (Commercial Cooking, Table Service)	
Limited Cooking Restaurants (No Commercial Cooking, No Table Service)	
Wine Bars (No Commercial Cooking)	

<b>Does the establishment offer any of the following? (Check all applicable)</b>	
Happy hour between 8pm-close	
Operate between the hours of midnight and 5am	
Alcohol service over two hours after food service ends	
Alcoholic drink specials under \$4, buy-one-get-one offers, complimentary drinks, or all-you-can-drink specials	
Amusement devices or activities (e.g. mechanical bulls, axe throwing, darts...)	
Live concerts with 3 or more performers	
Door bouncers	
Sports activities (e.g. volleyball, boxing, bowling...)	
Animals in cooking or dining areas	
Hosting special events beyond standard in-house promotions (e.g. street fair, block party)	
Dance floor	
ATM	
Hookah	
<b>None of the above</b>	



<b>Underwriting Question</b>	<b>Yes</b>	<b>No</b>
Does management have at least 3 years' experience in managing foodservice establishments?		
Does the business have more than one location?		
Has the business filed any claims in the past 3 years?		
If "Yes" number of claims:		
If "Yes" did the total incurred value of claims exceed \$50,000?		
Does the establishment have more than 6 deep fat fryer units?		
Is the establishment responsible for a parking lot?		
Is the establishment cash only?		
Does the establishment have stairs used by patrons?		
If "Yes" do the following apply: - Adequate illumination - In good repair with no visible torn or frayed carpet, or cracked or broken steps - Slip-resistant surface - Sturdy handrail		
Is there a playground on the premises?		
If "Yes" do the following apply to the playground: - Equipment securely anchored - Loose-fill or unitary impact surfacing material - No protrusions or openings that can entangle something around a child's neck or clothing - No metal chain swings - No trampolines - No spiral slides with over one 360 degree turn - No equipment that allows children to fall inside the structure and onto other parts of the structure - No teeter-totters or gliders		

<b>Does the applicant have any of the following exposures? (Check all applicable)</b>	
Own and operate a food truck or food cart	
Operate a temporary food stand at events	
Sublease the insured location as a ghost kitchen at any time	
Operate a virtual brand out of the insured location	
<b>None of the above</b>	



<b>What type of fire alarm is located at the premises?</b>	
UL with certificate	
Central station	
Local	
None	

<b>Are any of the following types of cooking performed (Check all applicable)?</b>	
Solid fuel	
Wok	
Charbroiling	
None of the above	

<b>How often are hoods, grease removal devices, fans, and ducts inspected and cleaned by a properly trained and certified technician?</b>	
Never	
Annually	
Semi-annually	
Quarterly	
Monthly	
Not applicable (no commercial cooking)	

<b>Does the establishment utilize any of the following third-party delivery services?</b>	
Uber Eats, Doordash, etc.	
Robotic delivery	
No third-party delivery	

<b>Does any of the following apply to the business, or any of its officers, owners, or partners (Check all applicable)?</b>	
Been convicted of a felony in the past 5 years	
Declared bankruptcy	
Had business-related lawsuits, mediations, or arbitrations filed against them	
Become aware of any losses, accidents, or circumstances that might give rise to a claim against this policy	
Had their commercial insurance coverage canceled, revoked, or non-renewed in the last 5 years (other than cancellation for non-payment or non-renewal for discontinuation of program)	
None of the above	



# Liability

General Liability Limits	
\$500,000 / \$1,000,000	
\$1,000,000 / \$2,000,000	
\$2,000,000 / \$4,000,000	

Gross Annual Sales (\$)	Percent from Catering (%)	Percent from Alcohol (%)

Liquor Liability Limits	
No coverage	
\$100,000 / \$100,000	
\$300,000 / \$300,000	
\$500,000 / \$500,000	
\$1,000,000 / \$1,000,000	

Hired and Non-Owned Auto Limit	
No coverage	
\$500,000	
\$1,000,000	

Hired and Non-Owned Auto Acknowledgement	Yes	No
Hired and non-owned autos will not be used for delivery of individual orders or catering.		



# Property

Construction Type		Roof Type	
Frame		Shingle	
Joisted Masonry		Membrane	
Non-Combustible		Metal	
Masonry Non-Combustible		Tar and Gravel	
Modified Fire Resistive		Tile	
Fire Resistive		Wood Shake	

Building Information	Yes	No
Sprinkler?		
Total Area of building or unit occupied by insured (SQFT):		

<b>Year Built</b>	<b>Latest Roof Update</b>
<b>Latest Plumbing Update</b>	<b>Latest Electrical Update</b>

Property Coverages	
Building Limit	
Tenant's Improvements and Betterments Limit	
Business Personal Property Limit	

Property Deductible	Wind/Hail Deductible
\$500	No separate deductible
\$1,000	1%
\$2,500	2%
\$5,000	5%
\$10,000	No coverage
\$25,000	



<b>Is the establishment in any of the following?</b>	
Attached to habitational structure (apartments, condos) If "Yes" do any of the following below also apply:	
Single unit used by the owner or general manager	
Restaurant spaced separated by a fire wall from all habitational units rated for 2 hours (non-sprinklered) or 1 hour (sprinklered)	
Stand alone building	
Strip shopping center	
Enclosed mall	
None of the above	



## Additional Coverages

Would you like to customize or add any additional coverages?	Yes	No
Premier Package (if no Primary will be included)		
Equipment Breakdown (Included in Premier)		
Food Spoilage (\$2,500 Primary / \$25,000 Premier)		
Limit (\$100,000 max):		
Back Up of Sewers and Drains (\$5,000 Premier)		
Limit (\$50,000 max):		
Outdoor Signs (\$10,000 Premier)		
Limit (\$50,000 max):		

Employee Dishonesty (\$1,000 Primary / \$10,000 Premier)			
Limit		Deductible	
No Coverage			
\$2,500		\$500	
\$5,000		\$1,000	
\$10,000		\$2,500	
\$25,000		\$5,000	
\$50,000			
\$75,000			
\$100,000			

Employee Benefits Liability Limits	
No coverage	
\$500,000 / \$500,000	
\$1,000,000 / \$1,000,000	

Food Borne Illness - Business Interruption	
Limit	
No coverage	
\$25,000	
\$50,000	
\$75,000	
\$100,000	





<b>Contamination Shutdown (\$10,000 Premier)</b>	
<b>Limit</b>	
No coverage	
\$10,000	
\$25,000	
\$50,000	
\$100,000	

<b>Cyber Suite Coverage</b>		
No Coverage		
<b>Limit</b>	<b>Deductible</b>	
\$50,000	\$1,000	
\$100,000	\$1,000	
\$250,000	\$2,500	
\$500,000*	\$10,000	
\$1,000,000*	\$10,000	

\*Requires increased limits questionnaire below

<b>Cyber Suite Increased Limits Questionnaire</b>	<b>Yes</b>	<b>No</b>
Has the applicant, at any time during the past 36 months, experienced a cyber incident (hacking, intrusion, malware infection, fraud loss, breach of personal information, extortion, etc.) that cost more than \$10,000 or experienced a lawsuit or other formal dispute (with either a private party or government agency) arising from a cyber incident?		
Does the applicant use up-to-date anti-virus and anti-malware protection on all of their endpoints (desktops, laptops, servers, etc.)?		
Are all of the applicant's internet access points secured by firewalls?		
Does the applicant restrict employees' and external users' IT systems privileges and access to personal information on a business-need-to-know basis?		
Does the applicant perform backups of business critical data on at least a weekly basis?		
Does the applicant encrypt all of their mobile devices (laptops, flash drives, mobile phones, etc.) and confidential data?		



<b>Employment Practices Liability</b>		
No Coverage		
There have been <b>NO</b> prior employment-related practices claims or any situation that may give rise to one.		
<b>Limit</b>	<b>Deductible</b>	
\$50,000	\$2,500	
\$50,000	\$5,000	
\$100,000	\$2,500	
\$100,000	\$5,000	
\$250,000	\$2,500	
\$250,000	\$5,000	
\$250,000	\$10,000	
\$500,000	\$10,000	
\$500,000	\$25,000	
\$1,000,000	\$10,000	
\$1,000,000	\$25,000	



# Discounts and Payment Plan

<b>Please list any restaurant associations the insured belongs to below:</b>	

<b>Additional Discounts (Check all applicable)</b>	
Business maintains a formal employee training program and employee handbook	<input type="checkbox"/>
Business's full-time employee turnover was less than 50% over the past 12 months	<input type="checkbox"/>
Business maintain a security contract, including central station alarm and video surveillance	<input type="checkbox"/>
Business maintain a formal preventative maintenance and food safety program	<input type="checkbox"/>
Business maintain a public Google Business Profile or Yelp My Business page	<input type="checkbox"/>
Is the business part of a franchise? (If "Yes" please list below):	<input type="checkbox"/>

<b>Payment Plan</b>	
Pay as you go	<input type="checkbox"/>
Monthly installments	<input type="checkbox"/>
Pay in full	<input type="checkbox"/>