

Restaurant & Food Services Application

including take-out, dine-in, coffee & donut shops

Restaurant Name	
Owner's Name	
Restaurant Address	
City	Province Post Code Country
Mailing Address	
City	Province Post Code Country
Phone Number	Cellular Phone E-mail
Web site	
How many years have you been in th	e industry? How long have you owned this restaurant?
If less then 3 years, please state experience	
Annual Sales	Food Split % Other %
What are your hours of operations?	
Is this restaurant owner operated?	☐ Yes ☐ No ☐ Do you have a full time manager? ☐ No ☐ No
# Full Time Employees	# Part Time Employees
Does your restaurant serve alcohol?	Yes If yes, are all servers Smart Serv Lic? No No
Any liquor or food violations in the past 5 years?	Yes If yes, please provide details
Any deliveries?	Yes If yes, what % of sales does this represent? No
Do you hire independent drivers?	Yes Do you receive proof of insurance from all drivers? No No

Any off site catering?	☐ Yes ☐ No	If yes, what % of sales does this represent?		
If yes, are you serving alcohol off site	Yes No			
Building Construction		Building Type		
Number of Stories	Sqft of the building		Sqft you occupy	
Year Built	If you are	unsure how old is this b	puilding?	
If over 30 years, p	olease select when	the following serv	rices were last updated:	
Wiring Plumb	ping	Heating	Roof	
# of seats inside Do y	rou have a patio?	Yes If y	es, number of seats	
	Yes If yes, w	hat do you use it for?		
Do you have a monitored alarm syste	em? Yes	If Yes, Inter	rior motion detector?	
Name of alarm company				
Amount of cash kept on site		nave a safe?	Safe Class	
Fire hydrant-protected (within 25 Me	Yes No	Kilometers to		
Premises protected by a sprinkler sys	tem? Yes	Connected to	☐ Yes alarm system? ☐ No	
If you do any deep	fat frying please d	escribe the Fire Su	ppression System	
Wet Chem System	Dry Chem 9	System	☐ K Type in the Kitchen	
Any entertainment ?	f yes, check all that app	y: Live Bands	Juke Box Karaoke	
DJ Dance Floor sqft	Pool Tables #	☐ Video Games	# Dart Boards #	
Do you ever hire bouncers, doorme	en or additional securi	ty?:		
Other Activities				

Mandatory Coverage Limits	these limits mast be complete	teu
Select your policy deductible (min. \$1,0		
Do you own this building?		
Building Coverage		
Annual rent from tenants		
Equipment limit - Including leasehold/t	enants improvements	
Stock limit		
Boiler Insurance/Equipment Breakdown	ו	
Business Interruption - if nothing select	ed 35% of gross sales will be used	
Commercial Liability Limit		
Extended property coverage - autom you would like higher limits than sho		nits may be higher depending on insurer. If t.
Crime Coverage		
Emplo	yee dishonesty	
Broad	From Money	
	,	
Non-Owned Automobile	,	
Non-Owned Automobile Tenants Legal Liability		
Tenants Legal Liability		
Tenants Legal Liability Extra Expense		
Tenants Legal Liability Extra Expense Accounts Receivable		
Tenants Legal Liability Extra Expense Accounts Receivable Professional Fee		
Tenants Legal Liability Extra Expense Accounts Receivable Professional Fee Valuable Papers and Records		
Tenants Legal Liability Extra Expense Accounts Receivable Professional Fee Valuable Papers and Records EDP - (Computers, touch screens, etc)		
Tenants Legal Liability Extra Expense Accounts Receivable Professional Fee Valuable Papers and Records EDP - (Computers, touch screens, etc) Fine Arts		
Tenants Legal Liability Extra Expense Accounts Receivable Professional Fee Valuable Papers and Records EDP - (Computers, touch screens, etc) Fine Arts Exterior Signs - Including Street Clocks,	Antennae and Satellite Receivers	
Tenants Legal Liability Extra Expense Accounts Receivable Professional Fee Valuable Papers and Records EDP - (Computers, touch screens, etc) Fine Arts Exterior Signs - Including Street Clocks, Glass	Antennae and Satellite Receivers	

Current Insurance Company	Renewal Date	
In the past 5 years has your has	any insurance company declined to quote or canceled your coverage?	☐ Yes ☐ NO
If yes, please explain		
In the past 5 years have you ha	d any claims or are you aware of any pending actions against you? e past 5 years	☐ Yes ☐ NO
1		
2		
lf y	ou have more then 2 losses in 5 years please call our office directly.	
Remarks		
	h our office a semi-annual service contract must be in place for the fi	
insured as a signing officer		behan of the named
Signed By	Date	
Position		
	Unison Insurance & Financial Services Inc.	