

Commercial Insurance Application:



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Program Manager: Chris Price.....617-398-5557

Marketing Manager: Jon Fador.....617-398-5558

Account Executive: Lauren Kachadorian.....617-398-5560

Insured's Legal Name: _____

St. Address: _____

Mailing Address: _____

City, State, Zip: _____

Contact Name: _____

Contact Number: _____

Website Address: _____

Quotes Requested

[] General Liability

[] Liquor Liability

[] Umbrella Liability

[] Property

[] Worker's Comp

General Info

Effective Date of Insurance: _____

Current Carrier: _____

Years in business [*Current ownership only*] _____

If Submission is for a new business venture, please provide additional details regarding owner/management's experience in the industry _____

Number of Employees: _____

Full Time Part Time Seasonal

Annual Payroll: _____

of Lanes: _____

Receipts (Gross Sales)

Property Values (See Below)

Bowling _____

_____ Building (1)

Liquor _____

_____ Contents (2)

Food (*excluding liquor*) _____

_____ Outdoor Signs

Pro Shop _____

_____ Fences

Arcade/Games _____

_____ Light Poles

Other _____

_____ Business Income (3)

(1) Building: The building or structure itself. Should include any permanently installed fixtures and equipment such as the lanes, ball returns, and pinsetters

(2) Contents: Business personal property not included above. Includes stock held for sale

(3) Business Income: Net income that would have been earned over a policy year had a covered loss not occurred

Liquor Liability Questionnaire

Question	Yes	No
Does the center maintain an active & valid liquor license?		
Has the license ever been revoked or suspended?		
Has the center ever been fined for an alcohol related event (ie. Underage drinking)		
Does the bar put on any drinking games or competitions for patrons?		
Does the bar area remain open after the lanes have closed for the night?		
Is there a dance floor in the bar/restaurant area?		
Do all servers possess TIPS certification? (or similar course)		
Does the bar/lounge area have a separate outside entrance?		

Alcohol Sales Breakout: *(A rough guess is ok)*

Beer % _____ Wine % _____ Liquor % _____

How would you best describe the alcohol operations? (Check one)

- Snack bar
- Family restaurant
- Pub/Tavern
- Club/Lounge
- Other _____

What size drinks are made available to customers? (Check all that apply)

- Bottles & Glasses (Beer 12-16oz, Wine 5oz) Pitchers Shots or shooters

Does the center offer any alcohol promotions? (Check all that apply)

- Happy hour specials Dollar drafts
- Ladies Nights N/A – no specials
- Other _____

Does the center utilize any of the following security personnel? (Check all that apply)

- Bouncers or security staff - Employees Off-duty police
- Bouncers or security staff - Subcontracted N/A

Please check any weapons carried by security personnel:

- Firearms Other _____ N/A

Property Questionnaire

Question	Yes	No
Does the center allow for patrons to smoke indoors?		
Does the center re-finish pins on site?		
Does the center have an automatic or electronic scoring system?		
Are all cooking services protected by a duct and hood system?		
Is there a service contract in place to clean duct and hood?		
Is there a deep-fat fryer on site?		
Does the kitchen contain an automatic fire suppression system? (ie. Ansul)		

Which best describes the construction & finish of the lanes?

- Wood w/ shellac finish
 Wood w/ lacquer finish
 Wood w/ urethane finish
 Synthetic Lanes
 Other _____

Who is responsible for refinishing the lanes?

- Owner/employee
 Hired subcontractors
 n/a – none needed

How are chemicals/cleaners stored on premises?

- Fire-proof cabinets
 n/a – no chemicals stored onsite
 Separate storage room
 Other _____

Does the center have any of the following safety features? (Check all that apply)

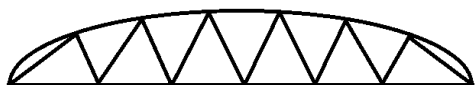
- Fire extinguishers
 Video monitoring
 Burglar alarms
 Other _____

Construction Type (ie. Frame, Block, metal, etc.) _____

Year Built _____ **Square footage** _____

Are WOOD trusses used in the building & roof construction? _____

If yes, are they bow trusses? _____



(Example of a bow truss design – typically found in dome-shaped roofs)

% of Building Sprinklered _____ **Date of last service/maintenance** _____

Property Questionnaire Continued

Please Indicate all completed building improvements(including year and brief description) :

Wiring: _____

Roofing: _____

Plumbing: _____

Heating: _____

Other: _____

Additional Info

Question	Yes	No
Has your insurance coverage been cancelled or non-renewed in the last 5 years?		
Have you had a property, general liability, or liquor liability loss in the past 3 years? <i>(Please note that 3 years of loss history is required at binding)</i>		

Expiring Premiums

[] General Liability _____

[] Liquor Liability _____

[] Umbrella Liability _____

[] Property _____

[] **TOTAL** _____

Additional Details/ Additional Interest(s)

(Mortgage holders, special features, etc.)

Claim Details

(Approx. date, Amount paid, Circumstances etc.)

To the best of my knowledge and belief the information provided in this application, whether in my own hand or not, is true and I have not withheld any material facts. I understand that non-disclosures or misrepresentation of a material fact will entitle the company to void the Insurance. I understand that signing this Application does not bind me to complete the insurance but agree that should an insurance policy be issued, this Application and the statements made therein shall form the basis of the insurance policy.

Name _____ Date _____

X _____