



**Dallas**  
P: (972) 789-1962  
F: (972) 789-1967

**Houston**  
P: (281) 759-4855  
F: (281) 759-7245

**hullandco-texas.com**



**RESTAURANT/TAVERN/BAR PDQ  
SUPPLEMENTAL APPLICATION**

Date: \_\_\_\_\_

Agency Name: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Policy #: \_\_\_\_\_

**GENERAL INFORMATION**

Receipts:	Total:	\$ _____	Total Employees:	FT _____	PT _____
	Food:	\$ _____	Bar Tenders:	FT _____	PT _____
	Liquor:	\$ _____	Servers:	FT _____	PT _____
	Other:	\$ _____			

Currently open for business? Yes \_\_\_\_\_ No \_\_\_\_\_ Average Clientele Age \_\_\_\_\_

Is Property for Sale? Yes \_\_\_\_\_ No \_\_\_\_\_ Is Operation Seasonal? Yes \_\_\_\_\_ No \_\_\_\_\_ Days: \_\_\_\_\_

Is Property vacant, foreclosed or undergoing renovation? Yes \_\_\_\_\_ No \_\_\_\_\_

Is Property in deteriorating condition? Yes \_\_\_\_\_ No \_\_\_\_\_

Distance to Ocean/Bay/Gulf/Intercoastal? \_\_\_\_\_ Protection Class? \_\_\_\_\_

Is Parking Lot under Insured's Control? Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, Sq. Ft. \_\_\_\_\_

Building Age: \_\_\_\_\_ Sprinklered? Yes \_\_\_\_\_ No \_\_\_\_\_

Date of Bldg. Upgrades: Plumbing \_\_\_\_\_ Wiring \_\_\_\_\_ Heating \_\_\_\_\_ Roof \_\_\_\_\_

Premises: Owned \_\_\_\_\_ Leased \_\_\_\_\_ Operating Hours: \_\_\_\_\_

Total Area \_\_\_\_\_ sq. ft. Customer Area \_\_\_\_\_ sq. ft. Seating Capacity \_\_\_\_\_

Apartments Yes \_\_\_\_\_ No \_\_\_\_\_ # of Apts. \_\_\_\_\_

Are facilities rented out? Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, # times per year \_\_\_\_\_

Central Station Burglar Alarm? Yes \_\_\_\_\_ No \_\_\_\_\_ Fire Alarm? Yes \_\_\_\_\_ No \_\_\_\_\_

Are owners active in business? Yes \_\_\_\_\_ No \_\_\_\_\_ Years of Experience: \_\_\_\_\_

Has applicant filed for personal or business related bankruptcy? Yes \_\_\_\_\_ No \_\_\_\_\_

Risk previously canceled for non-payment within past 3 years? Yes \_\_\_\_\_ No \_\_\_\_\_

Is the risk a Sports Bar? Yes \_\_\_\_\_ No \_\_\_\_\_ Is the risk a Bottle, Night or Private Club? Yes \_\_\_\_\_ No \_\_\_\_\_

Cooking: Deep Fat Fryers? Yes \_\_\_\_\_ No \_\_\_\_\_ Open Flame? Yes \_\_\_\_\_ No \_\_\_\_\_

Cooking controls: Automatic Suppression System? Yes \_\_\_\_\_ No \_\_\_\_\_

Active Service Contract? Yes \_\_\_\_\_ No \_\_\_\_\_

Service & Cleaning Frequency: Automatic Suppression System \_\_\_\_\_ Hoods/Ducts \_\_\_\_\_

Suppression System protect all Hoods, Ducts & Griddles? Yes \_\_\_\_\_ No \_\_\_\_\_

Suppression System have an Automatic Fuel Shut-Off Device? Yes \_\_\_\_\_ No \_\_\_\_\_

Do the Deep Fat Fryers have Automatic High Limit Shutoff? Yes \_\_\_\_\_ No \_\_\_\_\_

Tablesides cooking? Yes \_\_\_\_\_ No \_\_\_\_\_ Open Bar-B-Que Pits? Yes \_\_\_\_\_ No \_\_\_\_\_ Fondue cooking? Yes \_\_\_\_\_ No \_\_\_\_\_

Any Raw Seafood served? Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, Explain \_\_\_\_\_

Any firearms on premises? Yes \_\_\_\_\_ No \_\_\_\_\_

Any valet parking? Yes \_\_\_\_\_ No \_\_\_\_\_ Subcontracted to insured contractor? Yes \_\_\_\_\_ No \_\_\_\_\_

Any history of rowdiness or fights? Yes \_\_\_\_\_ No \_\_\_\_\_

Risk in an airport, bowling alley, skating or roller rink? Yes \_\_\_\_\_ No \_\_\_\_\_

Retailer visited & recommended risk? Yes \_\_\_\_\_ No \_\_\_\_\_

Risk located on a wharf, pier, beach, dock or piling? Yes \_\_\_\_\_ No \_\_\_\_\_

**ACTIVITIES AND ENTERTAINMENT**

Advise the number of the following on the premise, if any:

- Pool Table \_\_\_\_\_ Dart Boards \_\_\_\_\_ Video Games \_\_\_\_\_ Volleyball \_\_\_\_\_ Gambling Machines \_\_\_\_\_

Is there any entertainment on the premise? Yes \_\_\_ No \_\_\_ If Yes, how often & describe, e.g. live rock bands, DJ, etc. \_\_\_\_\_

Website Address (if any): \_\_\_\_\_

Bouncers or Security Guards? Yes \_\_\_\_\_ No \_\_\_\_\_

I.D. Checkers? Yes \_\_\_\_\_ No \_\_\_\_\_

Is there a dance floor? Yes \_\_\_ No \_\_\_ If Yes, Area = \_\_\_\_\_ sq.ft./Type of Dancing \_\_\_\_\_

Does this establishment employ female or male dancers? Yes \_\_\_\_\_ No \_\_\_\_\_

Does applicant have any Promotional Events? Happy Hour? \_\_\_\_\_ Ladies Night? \_\_\_\_\_

Other? Explain \_\_\_\_\_

Mechanical bulls or other patron participating activities? Yes \_\_\_ No

Does the risk have any playrooms or playgrounds? Yes \_\_\_ No \_\_\_

Is the risk a Catering establishment or Banquet hall? Yes \_\_\_\_\_ No

Any Off- Premises Catering? Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, Explain \_\_\_\_\_

Catering Receipts Percentage in relationship to Total Receipts? \_\_\_\_\_

Any Delivery operations currently taking place? Yes \_\_\_\_\_ No \_\_\_\_\_

**LIQUOR INFORMATION**

Is Liquor served beyond 2:00 a.m.? Yes \_\_\_ No \_\_\_

Does the facility allow BYOB? Yes \_\_\_\_\_ No \_\_\_\_\_

Is Liquor Liability to be quoted through PNIC- Colony Group?

If Yes:

- Advise type of training of Owners, Managers, Employees: \_\_\_\_\_

- Liquor License Held: Beer/Wine \_\_\_\_\_ Liquor \_\_\_\_\_ Both \_\_\_\_\_

- List and Describe all State Liquor Losses or Violations in Past Three Years. \_\_\_\_\_

None

If No:

- Advise Carrier, limits of coverage, effective dates, and policy number. \_\_\_\_\_

No Coverage

Have Alcohol Beverage Servers received Certified training? Yes \_\_\_\_\_ No \_\_\_\_\_

**LOSS HISTORY**

Any prior losses within the past 3 years? Yes \_\_\_ No \_\_\_ If Yes, Explain: \_\_\_\_\_

Any incidents involving Assault & Battery occurred in the past three (3) years? Yes \_\_\_\_\_ No \_\_\_ If Yes, Explain: \_\_\_\_\_

**I hereby certify that all information is accurate to the best of my knowledge:**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Producer: \_\_\_\_\_ Date: \_\_\_\_\_

Producer License #: \_\_\_\_\_ Date: \_\_\_\_\_