



Dallas
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hullandco-texas.com

HOTELS AND MOTELS

PLEASE COMPLETE FOR EACH PREMISES COVERED.

GENERAL INFORMATION

APPLICANT NAME: _____

PREMISES LOCATION: _____

EFFECTIVE DATE OF COVERAGE: _____

TOTAL YEARS OF EXPERIENCE: _____ TOTAL YEARS AT THIS LOCATION: _____

OPERATIONS

NUMBER OF ROOMS _____ AVERAGE ROOM CHARGE \$ _____

OCCUPANCY RATE _____% TOTAL ANNUAL ROOM RECEIPTS \$ _____

RESTAURANT OPERATIONS

- YES (Answer 1,2,3) NO
1. OWNED LEASED RECEIPTS \$ _____
2. QUARTERLY HOOD AND DUCT CLEANING? YES NO
3. ANSUL SYSTEM? YES NO

BAR/LOUNGE/DANCING..... YES NO IF YES TO ANY, PROVIDE DETAILS

BANQUET OR MEETING ROOMS YES NO

GAMBLING..... YES NO

KITCHENETTES/IN-ROOM COOKING YES NO

SEASONAL YES NO

VACANT OR UNOCCUPIED BUILDINGS.. YES NO

HOURLY, WEEKLY OR MONTHLY RATES YES NO

UNUSABLE/UNRENTABLE ROOMS YES NO

UNREPAIRED DAMAGE FROM PRIOR LOSSES YES NO

RENOVATIONS PLANNED OR IN PROGRESS YES NO:

DETAILS/COMMENTS: _____

CONSTRUCTION/PROTECTION INFORMATION

CONSTRUCTION TYPE:	<input type="checkbox"/> FRAME <input type="checkbox"/> BRICK VENEER <input type="checkbox"/> JOISTED MASONRY <input type="checkbox"/> MASONRY NONCOMBUST. <input type="checkbox"/> MODIFIED FIRE RESISTIVE <input type="checkbox"/> FIRE RESISTIVE		
YR. BUILT _____	# STORIES _____	PROTECTION CLASS ____	SQUARE FOOTAGE _____
BUILDING UPDATES:			
WIRING, YR. _____	PLUMBING, YR. _____	HEATING, YR. _____	ROOFING, YR. _____
SPRINKLERED	<input type="checkbox"/> YES _____% <input type="checkbox"/> LOCAL GONG <input type="checkbox"/> CENTRAL STATION <input type="checkbox"/> NO		
ALARM(S)	<input type="checkbox"/> BURGLAR <input type="checkbox"/> FIRE <input type="checkbox"/> SMOKE TYPE: <input type="checkbox"/> LOCAL <input type="checkbox"/> CENTRAL STATION		

COMPLETED BY: _____ DATE: _____