RESTAURANT INSURANCE QUESTIONNAIRE

Restaurant package underwriting intake

Designed for General Liability, Property, Business Income, Liquor, Auto, Cyber and Workers Compensation review.

Complete every applicable item and use N/A where appropriate. Attach the requested documents.
iPhone Files/Preview: tap a square and type X. Coverage is subject to carrier underwriting and final terms.

1. APPLICANT AND CONTACT INFORMATION

Exact legal entity name

DBA / trade name

FEIN

Entity type

Primary contact and title

Phone

Email

Requested effective date

Restaurant location (include suite number)

Mailing address, if different

Years in business

Years restaurant-management experience

Is this a new venture? YES ☐ NO ☐

Details / explanation:

Has ownership, entity name, concept, or location changed during the past five years? YES ☐ NO ☐

Details / explanation:

2. COVERAGE REQUESTED AND CURRENT INSURANCE

☐ General Liability

☐ Property

☐ Business Income

☐ Equipment Breakdown

- [ ] Spoilage / Food Contamination
- [ ] Liquor Liability
- [ ] Umbrella / Excess
- [ ] Workers Compensation
- [ ] Commercial Auto
- [ ] Cyber / Data Breach
- [ ] Employment Practices
- [ ] Crime / Employee Dishonesty

Requested limits, property values, deductibles and special requirements

Current carriers, policy numbers, limits, premiums, deductibles and expiration dates

Has any insurer declined, cancelled, nonrenewed, or restricted coverage for this operation? **YES** ☐ **NO** ☐

Details / explanation:

3. BUILDING AND OCCUPANCY

Occupied square footage

Total building square footage / stories

Year built

Major renovation years (roof/electrical/plumbing/HVAC)

Building construction type and roof type

Is the restaurant located in a shopping center, strip plaza, food hall, hotel, mall, or mixed-use building? **YES** ☐ **NO** ☐

Details / explanation:

List adjoining, above and below occupancies

Customer seating capacity

Maximum legal occupancy

Does the applicant own the building? **YES** ☐ **NO** ☐

Details / explanation:

If leased: landlord, lease requirements, additional insured, waiver, and primary/noncontributory requirements

Is there outdoor, patio, sidewalk, rooftop, or parking-lot seating/service? **YES** ☐ **NO** ☐

Details / explanation:

Are any portions of the premises vacant, subleased, or used by another operator? **YES** ☐ **NO** ☐

Details / explanation:

4. PROPERTY VALUES AND BUSINESS INCOME

Building value (if owned)

Business personal property / contents

Tenant improvements / betterments

Stock / food / beverage inventory

Equipment / kitchen machinery

Signs / awnings / outdoor property

Requested business-income limit

Requested restoration period

Peak-season inventory, refrigerated stock, or property away from premises

Are backup power, generator, temperature monitoring, or spoilage alarms used? **YES** ☐ **NO** ☐

Details / explanation:

Is flood, windstorm, or named-storm coverage required by a lease or lender? **YES** ☐ **NO** ☐

Details / explanation:

5. RESTAURANT CONCEPT AND SERVICE MODEL

Describe the concept, cuisine, customer profile, and service model

- [ ] Full service / table service
- [ ] Quick service / counter
- [ ] Takeout
- [ ] Delivery
- [ ] Catering
- [ ] Food truck / trailer
- [ ] Bakery / cafe
- [ ] Bar / lounge
- [ ] Buffet
- [ ] Private dining / events
- [ ] Late-night operation
- [ ] Franchise

Website, social media, online ordering, and event calendar links

List all cooking equipment and fuels used (fryers, grills, ranges, ovens, smokers, wood/charcoal, pressure cookers, etc.)

Is raw meat, seafood, sushi, ceviche, sprouts, or other higher-risk food prepared or served? **YES** ☐ **NO** ☐

Details / explanation:

Are food products manufactured, packaged, bottled, or sold wholesale under the applicant brand? **YES** ☐ **NO** ☐

Details / explanation:

6. SALES, PAYROLL AND CUSTOMER VOLUME

Sales: prior year food / alcohol / catering / delivery / total

Projected next 12 months: food / alcohol / catering / delivery / total

Percentage of sales: dine-in / takeout / delivery / catering / late-night (must total 100%)

Average customer check: lunch / dinner

Peak customers on premises

Full-time / part-time employees

Annual payroll

Are any workers paid cash, classified as 1099, leased, temporary, or supplied by a staffing firm? **YES** ☐ **NO** ☐

Details / explanation:

7. HOURS AND LATE-NIGHT EXPOSURE

Hours by day: doors open / kitchen closes / alcohol ends / customers leave / employees leave

Describe operations after 10:00 p.m. and after midnight, including frequency, revenue, kitchen status, and maximum customers

Do publicly posted hours differ from actual operating, event, pickup, or closing hours? **YES** ☐ **NO** ☐

Details / explanation:

Are customers allowed to congregate outside or in the parking lot after service? **YES** ☐ **NO** ☐

Details / explanation:

8. ALCOHOL AND LIQUOR LIABILITY

Is alcohol sold, served, furnished, given away, permitted, or allowed as BYOB? **YES** ☐ **NO** ☐

Details / explanation:

Liquor license type and number

Annual alcohol sales / percentage

Are shots, doubles, pitchers, buckets, bottle service, drink specials, complimentary drinks, or unlimited-drink packages offered? **YES** ☐ **NO** ☐

Details / explanation:

Are all servers trained in responsible alcohol service? YES ☐ NO ☐

Details / explanation:

Training program, certification percentage, ID-check standard, and ID-verification equipment

Are written intoxication, refusal-of-service, safe-ride, and incident-reporting procedures maintained? YES ☐ NO ☐

Details / explanation:

Has the liquor license or any employee been cited, fined, suspended, or disciplined? YES ☐ NO ☐

Details / explanation:

9. ENTERTAINMENT AND SECURITY

Are DJs, bands, karaoke, dancing, comedy, trivia, amplified music, sports watch parties, or ticketed/private events offered? YES ☐ NO ☐

Details / explanation:

Are promoters, outside organizers, armed/unarmed guards, or off-duty police used? YES ☐ NO ☐

Details / explanation:

Describe event frequency, cover charges, maximum attendance, security staffing, parking-lot control, and closing/dispersal procedures

10. COOKING AND FIRE PROTECTION

Is all commercial cooking equipment protected by an automatic UL 300 wet-chemical suppression system? YES ☐ NO ☐

Details / explanation:

Suppression contractor / last service

Hood/duct cleaner / last cleaning

Cleaning frequency

Last fire-marshal inspection

Are Class K extinguishers installed, tagged, accessible, and included in employee training? YES ☐ NO ☐

Details / explanation:

Are smokers, grills, fryers, pizza ovens, or cooking appliances outdoors or under an awning/canopy? YES ☐ NO ☐

Details / explanation:

For each smoker/solid-fuel appliance: make/model, fuel, UL listing, permanent installation, location, and distance from structure

Storage and disposal procedures for propane, wood, charcoal, pellets, cooking oil, grease, ashes, and embers

Is there a documented daily closing checklist for shutdown, grease disposal, ash/ember handling, and fire watch? YES ☐ NO ☐

Details / explanation:

11. FOOD SAFETY AND PREMISES CONTROLS

Last health inspection date

Latest grade / score

Are required food-manager and food-handler certifications current? YES ☐ NO ☐

Details / explanation:

Are written temperature logs, allergen procedures, cleaning schedules, pest control, and product-recall procedures maintained? YES ☐ NO ☐

Details / explanation:

Describe refrigeration monitoring, emergency response, and backup arrangements for power/equipment failure

Are floors, stairs, exits, walkways, restrooms, and customer areas inspected and documented regularly? YES ☐ NO ☐

Details / explanation:

12. DELIVERY, CATERING AND MOBILE OPERATIONS

Do employees or owners make deliveries, errands, supply pickups, catering trips, or bank deposits? YES ☐ NO ☐

Details / explanation:

Are third-party delivery platforms used? YES ☐ NO ☐

Details / explanation:

Delivery revenue, platforms, service radius, driver count, vehicles, mileage, and driver-screening procedures

Does the business own, lease, rent, borrow, or regularly use any autos, food trucks, trailers, or mobile equipment? YES ☐ NO ☐

Details / explanation:

Is off-premises catering provided? YES ☐ NO ☐

Details / explanation:

Catering revenue, maximum event size, radius, alcohol service, temporary cooking equipment, tents, trailers, and generators

Are written contracts and certificates of insurance obtained from venues, vendors, subcontractors, and temporary staff? YES ☐ NO ☐

Details / explanation:

13. ONLINE ORDERING, PAYMENTS AND CYBER

- ☐ Website ordering
- ☐ Mobile app
- ☐ Third-party delivery portal
- ☐ Customer loyalty program
- ☐ Gift cards
- ☐ Public Wi-Fi
- ☐ Online reservations
- ☐ Email/SMS marketing

Does the applicant collect or retain payment-card, customer, employee, delivery, or loyalty-program data? YES ☐ NO ☐

Details / explanation:

Are MFA, restricted administrator access, payment-security controls, backups, and employee phishing training used? YES ☐ NO ☐

Details / explanation:

Point-of-sale provider, online-ordering provider, data retained, and any prior breach/payment-card incident

14. WORKERS COMPENSATION AND EMPLOYMENT

Employee duties and payroll by class (servers, cooks, dishwashers, managers, delivery, security, catering)

Are minors employed? YES ☐ NO ☐

Details / explanation:

Are written hiring, harassment, discrimination, discipline, termination, and complaint-reporting policies maintained? YES ☐ NO ☐

Details / explanation:

Are background checks and motor-vehicle-record checks performed where appropriate? YES ☐ NO ☐

Details / explanation:

Is safety training documented for knives, slicers, burns, lifting, slips/falls, chemicals, violence, and emergency response? YES ☐ NO ☐

Details / explanation:

Are return-to-work and injury-reporting procedures maintained? YES ☐ NO ☐

Details / explanation:

15. CONTRACTS AND MANAGEMENT CONTROLS

Are certificates of insurance tracked for landlords, vendors, entertainers, security firms, contractors, and event organizers? YES ☐ NO ☐

Details / explanation:

Do contracts include indemnification, additional-insured, waiver-of-subrogation, and insurance requirements when appropriate? YES ☐ NO ☐

Details / explanation:

Is cash handled, transported, or deposited by employees? YES ☐ NO ☐

Details / explanation:

Describe cash controls, safe/alarm procedures, employee access, and deposit practices

Are weapons prohibited and are workplace-violence/security procedures documented? YES ☐ NO ☐

Details / explanation:

Describe any other exposure or control that would help an underwriter understand the operation

16. LOSS HISTORY, INCIDENTS AND COMPLIANCE

Any claims, incidents, accidents, demands, or circumstances during the past five years, whether insured or not? YES ☐ NO ☐

Details / explanation:

For each: date, type, description, amount paid/reserved, current status, and corrective action

Any health, fire, building, occupancy, liquor, labor, or code violations, fines, closures, or failed inspections? YES ☐ NO ☐

Details / explanation:

Any fights, assaults, weapons, robberies, police responses, foodborne illness, burns, slips/falls, or employment allegations? YES ☐ NO ☐

Details / explanation:

Any bankruptcy, tax lien, foreclosure, criminal conviction, or financial distress involving the entity or an owner? **YES** ☐ **NO** ☐

Details / explanation:

17. SUBMISSION CHECKLIST

- ☐ Completed signed questionnaire
- ☐ Current food and drink menus
- ☐ Current policies / renewal terms
- ☐ Five-year valued loss runs
- ☐ Interior/exterior/kitchen photos
- ☐ Hood and suppression reports
- ☐ Fire and health inspections
- ☐ Lease and occupancy certificate
- ☐ Liquor license and training records
- ☐ Security contract and COI
- ☐ Catering/vendor contracts
- ☐ Driver list and MVRs
- ☐ Payroll and sales support
- ☐ Written incident/alcohol/closing procedures

18. APPLICANT REPRESENTATIONS AND SIGNATURE

The applicant represents that the information provided is true, complete, and accurate to the best of their knowledge. The applicant understands that insurers may rely on this information to determine eligibility, pricing, terms and conditions, and that material misrepresentations or omissions may affect coverage. This questionnaire does not bind coverage.

Applicant name and title

Date

Applicant signature (type or sign)

Agent completing review

Date reviewed

Agent/broker notes and submission strategy (internal)