

Top Bop Underwriting Supplemental Questionnaire



Please answer ALL of the following questions.

Agency: _____ Effective Date: _____

DBA: _____

Insured: _____

- 1. Is it a Restaurant Risk? Yes No
- 2. Are there any "Lazy Susans" on premises? Yes No
If yes, how many of them? _____ Lazy Susans
- 3. Does the insured have open flame cooking area? Yes No
- 4. Is there an ANSUL extinguishing system installed in the hood in the cooking area? Yes No
- 5. What is the last service date for the ANSUL system? _____ Last Service Date:
- 6. When was the last date that the cooking hood was cleaned? _____ Last Service Date:
- 7. Do they have sprinkler (100% covered insured premises)? If yes, please take a picture of a sprinkler head for our file. Yes No
- 8. How many fire extinguishers on premises? _____ Extinguishers
- 9. Do they have central burglar alarm installed? Yes No
- 10. What is the name and the phone number of the alarm company?

Alarm Company Name: _____ Phone _____

Brief description of business nature:

Insured Signature: _____ Date: _____

Producer Signature: _____ Date: _____

Warranty: The purpose of this supplemental questionnaire is to assist in the underwriting process information contained herein is specifically relied upon in determination of insurability. The undersigned, therefore, warrants that the information contained herein is true and accurate to the best of his/her knowledge, information and belief. This supplemental questionnaire shall be the basis of any insurance that may be issued and will be a part of such policy. It is understood that any misrepresentation or omission shall constitute grounds for immediate cancellation of coverage or recession of policy and denial of claims, if any. It is further understood that the applicant and or affiliated company is under a continuing obligation to immediately notify his/her underwriter through his/her broker of any material alteration of the information given. Any person who knowingly and with intent to defraud any insurance company or another person files an application for insurance or statement of claim coverage containing any materially false information, or conceals for the purpose of misleading information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects the person to criminal and civil penalties.