



UNITED STATES LIABILITY INSURANCE GROUP

Convenience, Delicatessen and Grocery Stores

SUPPLEMENTAL APPLICATION

ALL QUESTIONS MUST BE ANSWERED AND APPLICATION MUST BE SIGNED BY APPLICANT

- | | Prohibited | Submit | Eligible |
|--|------------------------------|------------------------------|------------------------------|
| 1. Any prior claims? | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Annual sales over 3,000,000? | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. A risk over 4,000 Sq. Ft. | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Alcohol sales greater than 25% of annual sales? | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. More than 4 apartment units? | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Sales of gasoline over 75% of annual sales not including Lottery ticket sales. | <input type="checkbox"/> Yes | | <input type="checkbox"/> No |
| 7. Sales of propane tanks filled off premise by others? | | | <input type="checkbox"/> Yes |
| 8. Sales of propane tanks filled on premise? | <input type="checkbox"/> Yes | | <input type="checkbox"/> No |
| 9. Any commercial cooking with a grill or fryer on premise? | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 10. Any auto repair or car wash operation? | <input type="checkbox"/> Yes | | <input type="checkbox"/> No |
| 11. Any arcade or video game exposure? | <input type="checkbox"/> Yes | | <input type="checkbox"/> No |
| 12. Any firearms on premise? | <input type="checkbox"/> Yes | | <input type="checkbox"/> No |
| 13. Any fireworks sold on premises? | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 14. Is all the electrical wiring on circuit breakers? | <input type="checkbox"/> No | | <input type="checkbox"/> Yes |
| 15. Has the business been in operation under the same management for over 3 yrs? | <input type="checkbox"/> No | | <input type="checkbox"/> Yes |
| 16. Has the risk had any Health or Safety violations? | <input type="checkbox"/> Yes | | <input type="checkbox"/> No |
| 17. If cigarettes are sold, are procedures displayed and followed on verifying the age of customers purchasing cigarettes? | <input type="checkbox"/> No | | <input type="checkbox"/> Yes |
| 18. If open after 12 am does the facility have all the following? Surveillance cameras, central station hold up alarm, 2 or more employees on duty at all times, and adequate exterior lighting. | <input type="checkbox"/> No | <input type="checkbox"/> Yes | |
| 19. Any prior tax liens, bankruptcy or felony conviction? | <input type="checkbox"/> Yes | | <input type="checkbox"/> No |
| 20. Is there a delivery service now or one implemented at any time in the future?
If Yes, Non-owned & Hired auto is NOT available. | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 21. Hours of operation: <input type="checkbox"/> 24 hour or _____ | | | |

Food sales (Do not include alcohol or lottery ticket sales) \$ _____

Alcohol beverage sales \$ _____

Lottery Ticket sales \$ _____

Gallons of Gas sold _____

Number of Apartment units _____

Submit means this account may not be eligible for this Businessowners Product.
We can review a completed application for a Commercial Package policy.
If prohibited, please decline the account.

Submit Details _____

Applicants Signature _____ Date _____