ANDERSON INSURANCE BROKERS, INC.

1831 E. Roosevelt Road Wheaton, IL 60187

Phone: 630 681 8000 Fax: 630 681 0000

Fast Food Restaurant Product

FAST FOOD SUPPLEMENTAL APPLICATION

All questions must be answered and application must be signed by applicant.

2. Any table service? (waiters and waitresses) 3. Any Drive-in service? (Drive-thru are eligible) 4. Is there seating for more than 75 people? 5. Is there a bar or cocktail lounge? 6. Is there a dance floor, Live Entertainment or Bouncers? 7. Do any of the following apply? If Yes, attach BP-28. Any alcohol sales, open after 10:00 p.m., open before 5:00 a.m. 8. Sales of beer and wine are greater than 25% of total sales? 9. Any liquor sales other than beer and wine? 10. Is this risk open 24 hours? If Yes, apply a 50% surcharge. 11. Is the Total Floor area more than 7,500 sq ft? 12. Is the risk closed for more than 30 consecutive days? 13. Annual sales over 1,000,000? 14. Is food served off premise? 15. Is there a children's play area? 16. Any Firearms on premise? 17. Is there a wet chemical automatic extinguishing system in compliance with NFPA #96? 18. Is all the electrical wiring on circuit breakers? 19. Is their any aluminum or knob & tube wiring? 20. In Protection class 9-10, has the business been in operation under the same management for over 3 yrs? 21. Total property values greater than 600,000? 22. Is there a delivery service now or one implemented at any time in the future?	2. Any lable service? (waiters and waitresses) 3. Any Drive-in service? (Drive-thru are eligible) 4. Is there seating for more than 75 people? 5. Is there a bar or cocktail lounge? 6. Is there a dance floor, Live Entertainment or Bouncers? 7. Do any of the following apply? If Yes, attach BP-28. Any alcohol sales, open after 10:00 p.m., open before 5:00 a.m. 8. Sales of beer and wine are greater than 25% of total sales? 9. Any liquor sales other than beer and wine? 10. Is this risk open 24 hours? If Yes, apply a 50% surcharge. 11. Is the Total Floor area more than 7,500 sq ft? 12. Is the risk closed for more than 30 consecutive days? 13. Annual sales over 1,000,000? 14. Is food served off premise? 15. Is there a children's play area? 16. Any Firearms on premise? 17. Is there a wet chemical automatic extinguishing system in compliance with NFPA #96? 18. Is all the electrical wiring on circuit breakers? 19. Is their any aluminum or knob & tube wiring? 20. In Protection class 9-10, has the business been in operation under the same management for over 3 yrs? 21. Total property values greater than 600,000? 22. Is there a delivery service now or one implemented at any time in the future? 19. If Yes, Non owned & Hired auto is NOT available. Submit means this account is not eligible for this Businessowners Product. We can review an application for a General Packaguote with complete details. If Prohibited, please decline the account.	2. Any table service? (waiters and waitresses) 3. Any Drive-in service? (Drive-thru are eligible) 4. Is there seating for more than 75 people? 5. Is there a bar or cocktail lounge? 6. Is there a dance floor, Live Entertainment or Bouncers? 7. Do any of the following apply? If Yes, attach BP-28. Any alcohol sales, open after 10:00 p.m., open before 5:00 a.m. 8. Sales of beer and wine are greater than 25% of total sales? 9. Any liquor sales other than beer and wine? 10. Is this risk open 24 hours? If Yes, apply a 50% surcharge. 11. Is the Total Floor area more than 7,500 sq ft? 12. Is the risk closed for more than 30 consecutive days? 13. Annual sales over 1,000,000? 14. Is food served off premise? 15. Is there a children's play area? 16. Any Firearms on premise? 17. Is there a wet chemical automatic extinguishing system in compliance with NFPA #96? 18. Is all the electrical wiring on circuit breakers? 19. Is their any aluminum or knob & tube wiring? 20. In Protection class 9-10, has the business been in operation under the same management for over 3 yrs? 21. Total property values greater than 600,000? 22. Is there a delivery service now or one implemented at any time in the future? 23. If Yes, Non owned & Hired auto is NOT available. Submit means this account is not eligible for this Businessowners Product. We can review an application for a General Package.			Prohibited	Submit	Eligible
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	Explain all custilit terrio		Exp	ain all submit items			
Explain all submit items							

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Virginia Notice: Statements in the application shall be deemed the insured's representations. A statement made in the application or in any affidavit made before or after a loss under the policy will not be deemed material or invalidate coverage unless it is clearly proven that such statement was material to the risk when assumed and was untrue.

Minnesota Notice: The clause "and/or authorization or agreement to bind the insurance" is replaced with "Authorization or agreement to bind the insurance may be withdrawn or modified based on changes to the information contained in this application prior to the effective date of the insurance applied for that may render inaccurate, untrue or incomplete any statement made with a minimum of 10 days notice given to the insured prior to the effective date of cancellation when the contract has been in effect for less than 90 days or is being canceled for nonpayment of premium.

Colorado Fraud Statement: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado division of insurance within the department of regulatory agencies.

District of Columbia Fraud Statement: WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

Florida Fraud Statement: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Kentucky Fraud Statement: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance 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.

Maine Fraud Statement: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefits.

New Jersey Fraud Statement: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

New York Fraud Statement: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim 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 shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

Ohio Fraud Statement: Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Oklahoma Fraud Statement: WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

Pennsylvania Fraud Statement: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim 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 civil penalties.	a crime and subjects such person to criminal and
Tennessee and Virginia Fraud Statement: It is a crime to knowingly provide false, incomplete company for the purpose of defrauding the company. Penalties include imprisonment, fines a Fraud Statement (All Other States): Any person who knowingly preserve payment of a loss or benefit or knowingly presents false information in of a crime and may be subject to fines and confinement in prison.	nd denial of insurance benefits. ents a false or fraudulent claim for
Applicants Signature	Date

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