

Package Insurance Application (Property/Liability)

OWNER /OPERATOR INFORMATION

Owner/Operator Name:			Effective Dat	te:	
FEIN:		_ # o	f Stores	-	
Street Address:					
City:		State:	Zip:	Region:	
Type of Entity: Corpor	ration:]	Partnership:	LLC:	Other:	
Contact :		E-mail	:		
Tel # :]	Fax # :		Expiring Premiu	ım:
		OFFICE IN	FORMATION		
Address:		Ci	ty:	State:	Zip:
Own Building	Lease Space	Square Foo	tage:		
Construction: Are there Sprinklers: Values: Buildin	Frame Yes No g:	·	Fire Resis		nry
(If more than one office,	attach additional	office information)			
	STORAGE	/WAREHOUSE	TRAILER IN	FORMATION	
Address:		City	/:	State:	Zip:
Own Building Construction:	Lease Space Frame		tage: Fire Resis		nry
Are there Sprinklers: Values: Buildin	Yes No g:	Co	ntents:		
(If more than one storag	e/warehouse, attac	h additional storag	e/warehouse inform	mation)	
		ADDITIONA	L COVERAGE	C	
Are you interested in EP	LI coverage?		les No	-	
Do you have Special Eve	ents throughout the	e year? Y	les No		
(If Yes, provide a list of all	Special Events held	throughout the year a	nd please notify us 7	days before the Special	Event)
INSURED SIGNATU	JRE:		TITLE:	DATE:	

PLEASE INCLUDE 5 YEARS OF HARD COPY LOSS RUNS

 16506 Pointe Village Drive Suite 103 Lutz, FL 33558

 ☎ 877-200-1718 • 813-926-1721 • Fax: 813-926-1724

 Email: Adam.Besnard@besnardinsurance.com

Web: www.besnardinsurance.com

STORE INFORMATION

(photo copy this page as needed, per store)

Cornoration Name:			
Address:			_ County:
City:		State:	Zip Code:
Store Type:			
Free Standing	Shopping Center	In Store	Oil Alliance
Convenience Store	Mall	Food Court	Airport
Drive-Thru Only	Satellite	Other (explain	n):
Ownership of Building:OwnedConstruction:FrameAre there Sprinklers:YesPlayground:Interior	Joisted Mase No Exterior Inter	onry Fire ior /Exterior	n) Resistive Masonry None
Square Footage:	Yr. Built:		# of Parking Spaces:
Are Deliveries made from this loca Delivery:% Drive-1		Seating	Capacity:
ATM at store location: Yes	No If Yes d	lo you Own	ATM Lease ATM
Annual Sales: T	ransaction Count:		-
<u>(EC</u>	<u>OTHE</u> G: SPORTS MEMO	<u>R EXPOSURE</u> DRABILIA, FI	
	G: SPORTS MEMO	DRABILIA, FI	NE ARTS, ETC.)
Exposure Description:	G: SPORTS MEMO	DRABILIA, FI	NE ARTS, ETC.)
Exposure Description: Value of Property:	5: SPORTS MEMO	DRABILIA, FI	NE ARTS, ETC.)
Exposure Description: Value of Property: <u>OTHER IN</u> Have you had your grill ducts/hood cle the last three months?	5: SPORTS MEMO	DRABILIA, FI DSURES: KIT YES	NE ARTS, ETC.) CHEN INFORMATION NO
Exposure Description: Value of Property: <u>OTHER IN</u> Have you had your grill ducts/hood cle the last three months?	5: SPORTS MEMO MPORTANT EXPO aned within CONTRACTOR PROVID	DRABILIA, FI DSURES: KIT YES	NE ARTS, ETC.) CHEN INFORMATION NO
Exposure Description: Value of Property: <u>OTHER IN</u> Have you had your grill ducts/hood cle the last three months? C Have you had your fryer ducts cleaned the last 6 months?	5: SPORTS MEMO MPORTANT EXPO aned within CONTRACTOR PROVID within	DRABILIA, FI DSURES: KIT YES ING THE SERVIC YES	NE ARTS, ETC.) CHEN INFORMATION NO E: NO
Exposure Description: Value of Property: <u>OTHER IN</u> Have you had your grill ducts/hood cle the last three months? C Have you had your fryer ducts cleaned the last 6 months?	5: SPORTS MEMO MPORTANT EXPO aned within CONTRACTOR PROVID within CONTRACTOR PROVID	DRABILIA, FI DSURES: KIT YES ING THE SERVIC YES	NE ARTS, ETC.) CHEN INFORMATION NO E:
Exposure Description: Value of Property: OTHER IN Have you had your grill ducts/hood cle the last three months? C Have you had your fryer ducts cleaned the last 6 months? C Do you have a "wet" Ansul system at th	S: SPORTS MEMO MPORTANT EXPO aned within CONTRACTOR PROVID within CONTRACTOR PROVID his location?	DRABILIA, FI DSURES: KIT YES ING THE SERVIC YES ING THE SERVIC YES	NE ARTS, ETC.) CHEN INFORMATION NO E: NO E:

Completion of this application does not establish a contract of insurance; coverage is not effective for this insurance term until approval by the insurance company.

STORE INFORMATION

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(photo copy this page as needed, per store	(photo copy	this pag	e as needed.	per store
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		_
		County:
	State:	Zip Code:
Shopping Center	r In Store	Oil Alliance
Mall	Food Court	Airport
Satellite	Other (explain)	:
	· -	I)
	Masonry Fire F	Resistive Masonry
	Interior /Exterior	None
Yr. Built:	#	# of Parking Spaces:
ive-Thru:	% Seating (Capacity:
es No If	Yes do you Own A	TM Lease ATM
Transaction Count	t:	
		2
R IMPORTANT E	EXPOSURES: KITC	CHEN INFORMATION NO
R IMPORTANT E	EXPOSURES: KITC yes	CHEN INFORMATION NO
R IMPORTANT E od cleaned within CONTRACTOR PRO eaned within	EXPOSURES: KITC YES OVIDING THE SERVICE	CHEN INFORMATION NO
R IMPORTANT E od cleaned within CONTRACTOR PRO eaned within	EXPOSURES: KITC YES OVIDING THE SERVICE YES	CHEN INFORMATION NO
R IMPORTANT E od cleaned within CONTRACTOR PRO eaned within CONTRACTOR PRO	EXPOSURES: KITC YES OVIDING THE SERVICE YES OVIDING THE SERVICE	CHEN INFORMATION NO NO NO
R IMPORTANT E od cleaned within CONTRACTOR PRO eaned within CONTRACTOR PRO n at this location? CONTRACTOR PRO	EXPOSURES: KITC YES OVIDING THE SERVICE YES OVIDING THE SERVICE YES	EHEN INFORMATION NO 2:
	Shopping Center Mall Satellite vned Leased/Tenar ame Joisted s No Exterior Yr. Built: location: Yes ive-Thru: es No If Transaction Count (EG: SPORTS MI	Shopping Center In Store Mall Food Court Satellite Other (explain) vned Leased/Tenant Other (Explain) ame Joisted Masonry Fire Here s No Exterior Interior /Exterior Yr. Built: #

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