

Your McDonald's Approved Package Insurance Representative Package Insurance Application for McDonald's

For term: 10/01/2009 to 3/1/2010

OWNER / OPERATOR INFORMATION

Owner/Operator Name	e:		Effective Dat	e □ 10/01/09 □ 0	Other:	
FEIN:		# of	Freestanding	# of	Satellites	
Street Address:						
City:				Regio	on:	
Type of Entity: Corp	oration:	_Partnership:	LLC:	Other:		
Contact :		E-mail :				
Tel #:		Fax # :		Expiring Pr	emium:	
		OFFICE INF	ORMATION			
Address:		City:		State:	Zip:	
☐ Own Building	☐ Lease Space	Square Footage:				
Construction: Are there Sprinklers: Values: Buildi	□ Yes □ No	☐ Joisted Masonry	□ Fire Resis		1 asonry	
(If more than one office						
(22 2000 00000 0000 0000		E/WAREHOUSE/	TRAILER INI	FORMATION		
Address:	-				•	
☐ Own Building Construction:	□ Lease Space □ Frame		age:			
Are there Sprinklers: Values: Buildi		Contents:				
(If more than one stora	ige/warehouse, atta	ach additional storage/	warehouse inform	nation)		
		ADDITIONAL	COVERAGE	1		
Are you interested in E	CPLI coverage?	□ Y6	es 🗆 No	•		
Do you require Bonds?		□ Y €	es 🗆 No			
Do you have Special Events throughout the year		he year? □ Ye	es 🗆 No			
(If Yes, provide a list of a	ll Special Events hele	d throughout the year an	d please notify us 7	days before the Sp	ecial Event)	
AUTHORIZED SIG	NATURE:		TITLE:	DA	TE:	

PLEASE INCLUDE THREE YEARS OF HARD COPY LOSS RUNS

BESNARD ÎNSURANCE

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/mcdonalds af.html

STORE INFORMATION

(photo copy this page as needed, per store)

National Store #:			
Corporation Name:			
ddress:		Co	unty:
ity:		State:	Zip Code:
tore Type:			
Free Standing	□ Wal-Mart	☐ In Store	☐ Oil Alliance
Convenience Store	□ Mall	☐ Food Court	☐ Airport
Drive-Thru Only	☐ Satellite	☐ Other (explain):	
nstruction: □ France there Sprinklers: □ Yes		·	•
•			
	Yr. Built: # of Parking Spaces: Seating Capacity:		
TM at store location:	ocation:	ER EXPOSURES ORABILIA, FINE	Broker use only TIV: ARTS, ETC.)
ie of Property:			
OTHER	R IMPORTANT EXP	OSURES: KITCHI	EN INFORMATION
ve you had your grill ducts/h last three months?		□ YES	□ NO
mot third months.	CONTRACTOR PROV	VIDING THE SERVIC	E:
ave you had your fryer ducts o	cleaned within	□ YES	\square NO
e last 6 months?	CONTRACTOR PROV	VIDING THE SERVIC	E:
you have a "wet" Ansul syste		□ YES	□NO
	CONTRACTOR PROV	VIDING THE SERVIC	E:
s the Ansul system been servi	iced/inspected by a qualifi	ied Ansul service contr	actor within
e last six months?		\square YES	\square NO
	CONTRACTOR PROV	IDING THE SERVIC	E:

PLEASE ATTACH WRITTEN VERIFICATION FROM EACH CONTRACTOR OR SERVICE PERSON FOR EACH STORE

Insurance products are offered through Besnard & Associates Insurance / Wells Fargo and are underwritten by Scottsdale Insurance Company, an unaffiliated insurance company. Completion of this application does not establish a contract of insurance; coverage is not effective for this insurance term until approval by Scottsdale Insurance Company. COMPL0108-10008 BESNARD ÎNSURANCE

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STORE INFORMATION

(photo copy this page as needed, per store)

National Store #:		• •	,
Corporation Name:			
Address:		Co	ounty:
City:		State:	Zip Code:
Store Type:			
☐ Free Standing	□ Wal-Mart	☐ In Store	☐ Oil Alliance
☐ Convenience Store	□ Mall	☐ Food Court	☐ Airport
☐ Drive-Thru Only	☐ Satellite	☐ Other (explain): _	
Construction:		v	•
Square Footage:	Yr. Built:	# of	Parking Spaces:
Drive-Thru:%			
ATM at store location: ☐ Yes	□ No If Yes	s do you □ Own ATN	I □ Lease ATM
WIFI: □ Yes □ No			Broker use only
Are Deliveries made from this le	ocation:		Dioxer use only
Annual Sales:	Transaction Count:		TIV:
Exposure Description: Value of Property:	EG: SPORTS MEM		
OTHER	R IMPORTANT EXI	POSURES: KITCHI	EN INFORMATION
Have you had your grill ducts/h	ood cleaned within	□ YES	□NO
the last three months?	CONTRACTOR PRO	VIDING THE SERVIC	'E:
Have you had your fryer ducts	cleaned within	□ YES	□NO
the last 6 months?	CONTRACTOR PRO	VIDING THE SERVIC	E:
Do you have a "wet" Ansul syste	em at this location?	□ YES	□NO
	CONTRACTOR PRO	VIDING THE SERVIC	CE:
Has the Ansul system been servi	iced/inspected by a quali		
the last six months?	CONTRACTOR PRO	☐ YES VIDING THE SERVIC	□ NO EE:
D. E. (GE. 1889.)			

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□ Convenience Store	□ Mall	☐ Food Court	□ Airport		
□ Drive-Thru Only	Only □ Satellite		□ Other (explain):		
Construction: ☐ Fran Are there Sprinklers: ☐ Yes Play Land: ☐ Interior		•	·		
•					
	Yr. Built: # of Parking Spaces: Seating Capacity:				
ATM at store location:	ocation: □ Yes □ No _ Transaction Count: OTHE EG: SPORTS MEMO	<u>R EXPOSURES</u> DRABILIA, FINE A	TIV:		
<u>OTHER</u>	IMPORTANT EXPO	<u> JSURES: KITCHE</u>	<u>N INFORMATION</u>		
Have you had your grill ducts/he	ood cleaned within	\square YES	□ NO		
he last three months?	CONTRACTOR PROV	IDING THE SERVICE	E:		
Have you had your fryer ducts o	cleaned within	□ YES	□NO		
he last 6 months?	CONTRACTOR PROV	IDING THE SERVICE	D:		
o you have a "wet" Ansul syste		□ YES	□NO		
·	CONTRACTOR PROV	IDING THE SERVICE	D:		
Has the Ansul system been servi he last six months?	ced/inspected by a qualifi	ed Ansul service contra			

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