



**Grocery Stores & Convenience Stores Supplemental Questionnaire
With & Without Gas Pumps**

Name of Account: _____

Agency Name: _____

State the gross annual receipts from:

Description of Operation	Annual Receipts
Gasoline	
Total Gallons	
Grocery & grocery related items	
Liquor/ Alcohol	

What are the hours of operations? _____
24 hour operations are ineligible

Does the insured have any of the following operations?

Description of Operations	Yes	No
Refilling or dispensing of LPG tanks?		
Sale of fireworks or any other similar novelty items?		
Automotive services, towing or repair work?		
Car Wash Facilities?		
ATM located outside the building?		
Check cashing facilities?		

Is there cooking on the premises? If yes the risk is ineligible.	Yes	No

Security System - Required for theft coverage.

Description of equipment	Yes	No
Is there a UL Certified Alarm System?		
Is the system local?		
Is the system Central Station		
Are there dead bolts on all exterior doors?		
Are Hold Up alarms present?		
Are there frequent bank deposits?		
Are there signs posted that employees have limited cash?		



Grocery Store/Convenience Store Questionnaire-Continued

Maximum amount of money on premises at any one time is \$ _____

Maximum amount of money kept on premises overnight is \$ _____

Is there a safe on the premises? _____ **What type:** _____

Is there a time delay? _____ **A Drop Safe?** _____ **Is it alarmed?** _____

Do sidewalks, parking lots or floor areas present any slip and fall exposures? _____

If yes describe: _____

Is there a documented floor inspection program? _____

If so, how often inspected? _____

Are shopping carts available for customers use? _____

Are they provided with seat belts? _____

Are there any trip and fall exposures presented from stock in aisles? _____

If yes, describe: _____

**Carrier Name, Policy #, Limits & Expiration Date of Pollution Liability for the Underground
Tanks:** _____

Note: The Texas Petroleum Tank Fund expired in 1998.