

General Liability Supplemental Application For Gasoline Stations

(Complete in addition to ACORD)

1. Name of Applicant: _____
 2. Hours of Operations: _____ Open 24 hours? Yes No
 3. Number of Gallons sold annually: _____ Number of Pumps: _____
 4. Please check all operations that apply and indicate annual gross sales:

<input type="checkbox"/> Car Wash - Full Service	\$ _____	<input type="checkbox"/> Car Wash – Self Service	\$ _____
<input type="checkbox"/> Convenience Store	\$ _____	<input type="checkbox"/> Gasoline Sales	\$ _____
<input type="checkbox"/> Liquor Sales	\$ _____	<input type="checkbox"/> LPG Sales	\$ _____
<input type="checkbox"/> Quick Lube	\$ _____	<input type="checkbox"/> Restaurant	\$ _____
 5. Auto Repair, Towing or Tune-Ups on premises?* Yes No
***If yes, complete Application A-116.**
 6. Annual gross sales for all operations combined: \$ _____
 7. Is the emergency automatic shutoff accessible to employees and customers? Yes No
 8. Are "No Smoking" signs posted in all areas where fuels are stored or dispensed? Yes No
 9. Are signs posted advising customers to turn off ignition while gas is being pumped? Yes No
 10. Tanks: Quantity: _____ Above or Below Ground? _____
 Age: _____ Construction: _____
 11. Are tanks equipped with tank monitoring systems? Yes No
 12. Are leakage tests performed on a monthly basis? Yes No
 13. Are tanks and dispensing systems in full compliance with all federal, state and/or local safety regulations? Yes No
 14. Are tires stored on or near the premises? Yes No
 15. Do you keep any firearms on the premises for protection? Yes No
 16. Do you keep any dogs on the premises? Yes No
 17. Is there a formal training program on what to do in the event of a robbery? Yes No
 18. Are the premises well lit during hours of darkness? Yes No
 19. Is there a truck stop? Yes No
 20. Who is responsible for snow removal? Applicant Contractor
 If contractor, is certificate of insurance obtained? Yes No
- CAR WASH – FULL SERVICE**
21. Are customers restricted from entering the wash tunnel on foot? Yes No
 22. Do you post signs at the wash tunnel stating that the facility assumes no responsibility for the loss of valuable items left inside the vehicle? Yes No
- CAR WASH – SELF SERVICE**
23. How often is the cleaning equipment inspected for proper functioning? _____
 24. If vacuum cleaners are provided, are they properly grounded and situated away from wet areas? Yes No
- CONVENIENCE STORE/RESTAURANT**
25. Do you sell weapons or ammunition? Yes No
 26. Do you operate a restaurant, deli or other cooking exposure on the premises? Yes No
 If yes, is table service provided? Yes No What is the seating capacity? _____
- **If yes, complete application A67.**
- If there are liquor sales, please answer questions 27 through 30.**
27. Do you reject seemingly forged identification? Yes No
 28. Is any alcohol consumption allowed on the premises? Yes No
 29. Do you carry Liquor Liability Insurance coverage? Yes No
 If yes, indicate name of insurance carrier and limits carried: _____

30. Do you keep smaller items, such as cigarettes and half-pints of liquor, in cages to prevent "smash and grab" theft? Yes No

LPG SALES

31. Distance from buildings: _____ Distance from gasoline pumps: _____

32. Is the area fenced? Yes No

33. Are customers allowed to fill their own tanks? Yes No

34. Tank capacity (gallons): _____

35. Number of gallons sold annually: _____

LESSORS RISK

36. Do you lease any space to other businesses? Yes No

If yes, please list and describe all tenants: _____

37. Area of leased space: _____ sq. ft.

38. Are all tenants required to carry their own Commercial General Liability Coverage? Yes No

If yes, what limits are required? \$ _____ / \$ _____

39. Do you collect certificates of insurance from all tenants on an annual basis? Yes No

Applicant's Signature

Date

Title

Producing Agent