



Signature Club Application Checklist

Please ensure that the following documents have been COMPLETED in FULL and SIGNED where required:

- Signature Club Application Form
- Property Schedule
- Structural Detail Form for All Buildings
- Liability Supplement

Please email the completed application package to Signature Risk Partners at:

applications@signaturerisk.com

Signature Club Application Form

General Information

Operating Name (all legal entities):	
Mailing Address:	
Risk Location (<input type="checkbox"/> as above)	
Contact:	Title:
Website:	Email:
Business Tel.:	Twitter: @

1. Renewal Date: _____ Expiring Premium: \$ _____ Target Premium: \$ _____
2. Current Insurance Company: _____ Property Deductible: \$ _____
3. Has the Management or Ownership changed in the last 12 months? Yes No
If Yes, please explain: _____
4. Does the Club have a written Risk Management Plan? Yes No
5. Is there anyone else with an interest in your company? (partner, mortgagee, etc.) Yes No
Please give details: _____

Details about the Club

1. Corporate Structure: Corporation Partnership Joint Venture Sole Proprietorship
2. Number of Members: _____ Number of Employees: _____
3. Do you operate a Licensed Bar or Lounge? Yes No
4. Do you offer Recreational Activities (Pool, Tennis, Squash, Spa, Fitness Centre) Yes No
If Yes, please list: _____
5. Do you operate a Restaurant? Yes No
6. Do any employees travel outside of Canada for business purposes? Yes No
If Yes, please explain: _____
7. Please share your Association Relationships (HAC, CMAC, etc): _____
8. Do you have changes in operations or construction planned during the next 12 months? Yes No
If Yes, please explain: _____

Signature Club Continued

Revenues - Annual Gross Revenues

Membership Dues & Initiation Fees	\$	<hr/>
Sales - Food Receipts	\$	<hr/>
Sales - Liquor Receipts	\$	<hr/>
Sales - Athletic Activities (Fees)	\$	<hr/>
Banquet/Wedding Rentals	\$	<hr/>
Other: <hr/>	\$	<hr/>
Total Revenues	\$	<hr/>

Coverages

1. Primary CGL Limit Required \$

2. Do you wish to purchase **Business Interruption** coverage? Yes No
 Limit Required \$

 (Please complete and include a Profits Worksheet)
3. Do you wish to purchase **Umbrella** coverage? Yes No
 Limit Required \$

Claims History - Please describe Any and ALL claims or law suits that you have had within the last FIVE (5) years.

No known or reported losses in the last 5 years.

1. Date:

 Type:

 Reserve:

 Amount Paid:

 Description:

 Loss Prevention Measures:

2. Date:

 Type:

 Reserve:

 Amount Paid:

 Description:

Declarations

I/We declare that:

1. The information in this application is true and correct and I/we have not withheld any relevant information.
2. I/We understand that any statement made in this application will be treated as a statement made by all of the people to be insured.

Signature of Applicant:

 Date:

Signature Club Property Schedule

**More than one location? Please complete a separate Property Schedule for each location.
Please attach existing SOV, if available.**

Building & Equipment Details	Size (sq ft)	Value	Contents & Equipment	Total Limit
Main Building				
Stock	n/a			
Maintenance Building				
Storage Buildings				
Mobile Equipment	n/a		n/a	
Fine Art	n/a		n/a	
Computer Equipment	n/a		n/a	
Signs	n/a		n/a	
Other:				
	TOTAL	\$	\$	\$

Water Abatement

1. Please describe any water intrusion incidents in the last 5 years (including roof, windows, walls, doors, floors, plumbing, HVAC or sprinkler related): _____

2. Please describe your Water Abatement Loss Prevention Measures: _____

Signature Club Structural Detail Form

(Required for all buildings)

Building Name: _____

1. Year Built: _____ Renovated? Yes No If Yes, describe: _____
2. Construction of Walls: Steel Steel/Concrete Concrete Block Frame
 Log Mixed (Frame/Masonry)
3. Exterior Finish: Masonry Brick Veneer Wood Metal Clad Siding
 Log Siding Other: _____
4. Winterized: Yes No
5. Roof: Style: Flat Peak Mansard Other _____
Construction: Wood Steel Concrete Other _____
Covering: Shingles Steel Asphalt Other _____
Replaced: Yes No If Yes, what year? _____
6. Floor Grade: Concrete Wood Second & above: _____
7. Area (sq. ft) Bsmt: _____ 1st Flr: _____ 2nd Flr: _____ 3rd Flr: _____ Decks: _____
8. Electrical: Fused Circuit Breakers Installed or Updated when? _____
9. Heating: Boiler Natural Gas Electric Forced Air Hot Water
10. Plumbing: Updated? Yes No If Yes, what year? _____ Partial OR Full Update
11. Distance to nearest Fire Hydrant: _____ ft. Municipal Yes No
12. Distance to nearest Dry Fire Hydrant: _____ ft. Distance to Private Fire Hydrant: _____ ft.
13. Distance to nearest Fire Hall: _____ kms. Volunteer Paid
14. Sprinkler System: Full Partial If partial _____% Centrally Monitored? Yes No
15. Fire Protection System: Smoke Detectors Heat Detectors Centrally Monitored? Yes No
16. Burglar Alarm System: Yes No Centrally Monitored? Yes No
17. Alarm Monitoring Company Name: _____
18. Is there a deep fat fryer in this building? Yes No
- If Yes, is there: Automatic wet fire suppression for each deep fat fryer? Yes No
Semi-annual maintenance contract for each unit? Yes No
A Class K portable extinguisher as back-up? Yes No
19. Is Back-up/Emergency Power available? Yes No

Storage/Maintenance & Other Buildings

Construction: _____ Roof: _____ Fire/Burglar Alarm: Yes NoConstruction: _____ Roof: _____ Fire/Burglar Alarm: Yes No

Signature Club Liability Supplement

Club Name: _____

1. Name the Liquor License is in: _____
2. Have you ever had your Liquor License suspended or cancelled? Yes No
3. Have you ever been cited for any Liquor violations? Yes No
4. Are all servers certified (Smart Serve, SIR, ProServe, SIA, etc.)? Yes No
5. Are any of the operations involving Liquor or Food contracted out? Yes No
6. Is a Manager on staff and onsite at all times when Liquor is being served? Yes No
7. Do servers attempt to determine if patrons will be driving after leaving the Club? Yes No
8. Is a Designated Driver Program in use and promoted by servers? Yes No
9. Is Taxi service available to and from the Club? Yes No
10. Do all event sponsors sign written contracts including Indemnity and Waiver clauses?
(i.e. Weddings, Banquets, etc.) Yes No
11. Does the Club require all independent contractors to carry liability insurance?
(i.e. Snow Removal, Construction Trades, etc.) Yes No

Loss Payee/Mortgage Information

Loss Payee #1: _____

Mailing Address: _____

Loss Payee #2: _____

Mailing Address: _____

- - End of Document - -