



Worker's Compensation Supplemental

General

1. Is the insured a franchise? Yes No
2. Is there any driving exposure? Yes No
If 'Yes' please provide driving radius _____ miles

Restaurants

1. Does the insured offer entertainment? Yes No
2. Are bouncers and/or doormen utilized? Yes No
3. Is the insured a seasonal operation? Yes No
4. Do the hours of operation exceed 12:00 midnight? Yes No
5. Is there delivery exposure? Yes No
6. Is there catering exposure? Yes No

Building Maintenance

1. Window cleaning performed outside? Yes No
2. Painting performed outside? Yes No
3. Do employees utilize pesticides or fertilizers? Yes No
4. Any job functions performed on rooftops? Yes No
5. Any operations requiring work from ladder more than one story? Yes No
6. Any tree trimming from off the ground (ladder, roof, cherry picker, etc.) Yes No
7. Any work performed at rooming or boarding houses? Yes No
8. Any work performed at locations with greater than 25% Section 8, HUD or any other subsidized Habitational establishment? Yes No
9. Do employees provide janitorial/building maintenance services to Habitational risks that have student housing? Yes No

Schools

1. Are any childcare services offered? Yes No
2. Do employees offer any form of medical instruction? Yes No
3. Are there any overnight field trips with students? Yes No
4. Is there any scouting or camping provided? Yes No

Beauty Parlors/Salons

1. Are tattoo or body piercing services offered? Yes No
2. Does the insured provide tanning beds or any other tanning service? Yes No

Hotel/Motel

1. Does the insured provide hourly room rates? Yes No
2. Does the insured provide any monthly or long term stay? Yes No

Meat/Fish/Poultry

1. Does the insured process sausage or ground meat? Yes No
2. Does the insured slaughter livestock? Yes No

Insured Name: _____

Producer Name: _____

Insured Signature: _____

Producer Signature: _____

Date: _____

Date: _____