



Signature Wine Application Checklist

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

- Signature Wine Application Form
- Property Schedule
- Signature Wine Supplemental Application
- Structural Detail Form for All Buildings
- Site Plan

Completed applications may be submitted to:



wineryapp@signaturerisk.com



via fax (705) 675-7461

Signature Wine Application Form



General Information

Name of Winery (all legal entities):	
Mailing Address:	
Risk Location (<input type="checkbox"/> as above)	
Contact:	Title:
Web Site:	Email:
Business Tel.:	Fax:

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 Winery have a written Risk Management Plan? Yes No
5. Is there anyone else with an interest in your vines? (farmer, partner, mortgagee, etc.) Yes No
Please give details: _____

Details about the Winery

1. Wine Region: _____ Nearest Town: _____
2. Corporate Structure: Corporation Partnership Joint Venture Sole Proprietorship
3. Number of Employees: Full Time: _____ Part Time: _____
4. Please share your Designations and Association Relationships (VQA, WCO, etc): _____
5. Is the Winery open year round? Yes No
6. Does an employee visit the premises daily during the off season? Yes No
7. What is the acreage size of your property? _____
8. Do you own vacant land or other property whereby insurance should be extended? Yes No
If Yes, what is the use and legal address: _____

9. What changes in operations or construction do you anticipate over the next 12 months: _____

10. Please describe the topography of your vineyard and list the varieties grown:

Topography		Crop Varieties		
Slope	% of Vineyard	Crop Variety	No. of Vines	Insured Value
Flat				
Gently Sloping				
Steep Slope				
Total	100%			

Signature Wine Application Form - Continued



Revenues - Annual Gross Revenues

Sales - Wholesale	\$	_____
Sales - Direct to Consumer	\$	_____
Sales - Direct to Restaurants	\$	_____
Sales - Direct to the United States	\$	_____
Sales - On Site Wine Tastings	\$	_____
Banquet/Wedding Rentals	\$	_____
Food Operations	\$	_____
Total Revenues	\$	_____

Coverages

1. Do you wish to purchase **Business Interruption** coverage? Yes No
Limit Required \$ _____ (Please complete and include a Business Interruption Worksheet)
2. Do you wish to purchase **Umbrella** coverage? Yes No
Limit Required \$ _____
3. Please provide underlying Automobile Policy Limit \$ _____ # of vehicles insured: _____

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

1. Date: _____ Type: _____
Reserve: _____ Amount Paid: _____
Description: _____

 2. Date: _____ Type: _____
Reserve: _____ Amount Paid: _____
Description: _____

- Loss Prevention Measures: _____

Loss Payee/Mortgage Information

- Loss Payee #1: _____
Mailing Address: _____
Loss Payee #2: _____
Mailing Address: _____

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 made in this application will be treated as a statement made by all of the people to be insured.

Signature of Applicant: _____ Date: _____

Signature Wine Property Schedule



More than one winery location? Please complete a separate Property Schedule for each location.

Building Name	Size (sq ft)	Building Value	Contents & Equipment	Stock	Total Limit
Main Building					
Storage Area					
Outdoor Tanks					
Maintenance Bldgs					
Dwelling					
Other:					
Other:					
SUB TOTAL 1		\$	\$	\$	\$

Listing of Required Property Limits	Limit
Outdoor Storage Tanks - List Value and Total Number of Tanks on Property	
Underground Storage Tanks and Wine Storage Caverns	
Trellis Valuation (metres of trellis x value per metre)	
Winemaking Equipment	
Mobile Agricultural Equipment (attach list)	
Contractors' Equipment (attach list)	
Wines in Process	
Estate Wines	
Vintage, Rare and Cellared Wines	
Bar/Cellar Stock	
Signs (Free Standing)	
Electronic Data Processing Equipment (if increased limit is required)	
Other:	
Other:	
SUB TOTAL 2	\$
SUB TOTAL 1	\$
GRAND TOTAL	\$

Signature Wine Supplementary Application



Winery Name: _____

1. Name the Winery 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 (SIP/TIPS/TAMS)? Yes No
5. Are any of the operations involving liquor or food contracted out? Yes No
6. Do all event sponsors sign written contracts including Indemnity and Waiver clauses?
(i.e. Tasting Events, Weddings, Banquets, etc.) Yes No
7. Does the Vineyard require all Independent contractors to carry liability insurance?
(i.e. Snow Removal Contractor, Grape Growers, etc.) Yes No
8. Does the Vineyard have fuel storage tanks? If Yes, please describe below. Yes No
9. Are there any other crops located at the vineyard not included on this application? Yes No
10. Do you have any other insurance on any of the crops? If Yes, please describe below. Yes No
11. During the last 5 years have you suffered any losses due to frost? If Yes, describe below. Yes No
12. Has the winery ever experienced ANY product recalls? If Yes, describe below. Yes No
13. Please list the **Type, Quantity** and **Location** of all **Chemicals** that are stored on premises:
Type: _____ Quantity: _____ Location: _____
Type: _____ Quantity: _____ Location: _____
Type: _____ Quantity: _____ Location: _____

Additional Information: _____

Signature Wine Structural Detail Form

(Required for all buildings)



Winery Name: _____	Building Name: _____
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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: Oil Natural Gas Electric Forced Air Hot Water
 Boiler Propane Steam Woodstove Fireplaces
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

Maintenance Building

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

Storage/Other Buildings

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

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