



## 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](mailto: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:
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/>
<b>Total Revenues</b>	\$	<hr/>

**Coverages**

1. Primary CGL Limit Required \$ 

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

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

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**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: 

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 Type: 

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 Reserve: 

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 Amount Paid: 

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 Description: 

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 Loss Prevention Measures: 

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2. Date: 

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 Type: 

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 Reserve: 

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 Amount Paid: 

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 Description: 

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 Loss Prevention Measures: 

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**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: 

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 Date: 

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# 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		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:				
	<b>TOTAL</b>	\$	\$	\$

## 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: \_\_\_\_\_
3. Exterior Finish: \_\_\_\_\_ Other: \_\_\_\_\_
4. Winterized:  Yes  No
5. Roof: Style: \_\_\_\_\_ Other: \_\_\_\_\_  
Construction: \_\_\_\_\_ Other: \_\_\_\_\_  
Covering: \_\_\_\_\_ 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: \_\_\_\_\_
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 &amp; 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: \_\_\_\_\_

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