Name of Applicant (Risk):       Date: 9/17/2014

**Bar Supplemental Questionnaire**

Type of Business: [ ]  Bar only [ ]  Bar/Restaurant [ ]  Night Club [ ]  Gentleman’s Club [ ]  Club – Other, please specify:

Menu (check all that apply): [ ]  Breakfast [ ]  Lunch [ ]  Dinner

 [ ]  Fine Dining [ ]  Family [ ]  Fast Food

 [ ]  Night Club [ ]  Theme [ ]  Pizza

 [ ]  Other – Please Explain:

What is the number of full time employees?       Part time?

Types of employee duties (check all that apply): [ ]  Bartender [ ]  Server [ ]  Dancer

 [ ]  Dishwasher [ ]  Bus tables [ ]  Make deliveries

 [ ]  Bookkeeping [ ]  Security (bouncer) [ ]  Entertainment

 [ ]  Parking [ ]  Other – Please Explain:

Is there any live entertainment? [ ]  No [ ]  Yes

Do the employees provide any entertainment? [ ]  No [ ]  Yes – If yes, what?

Is there any delivery? [ ]  No [ ]  Yes – If yes, what is the radius of deliver?       miles.

 If yes, are employee or company vehicles used?

Is there catering provided? [ ]  No [ ]  Yes **If yes answer the following**

Number of delivery persons :

Hours of delivery :      AM to      PM or      PM to      PM

Vehicles used for delivery : Employees Vehicles [ ]  Company Vehicles [ ]

Is there valet parking? [ ]  No [ ]  Yes

Door security, are I.D.’s verified to enter? [ ]  No [ ]  Yes

What are the hours of operation?

What are the gross receipt sales? $

What percentage of gross receipt sales are alcohol?      %

Is there a safe on premises? [ ]  No [ ]  Yes How often are bank deposits made?

What type of floor surface is in the kitchen / dining room / serving areas?

Are employees required to wear slip proof shoes? [ ]  No [ ]  Yes [ ]  Will implement

Please indicate the condition (if applicable) of the following:

Housekeeping?       Equipment Guarded?

Proper Footwear?       Adequate Lighting?

Traffic Area Defined?       Is the owner active in daily management?

Is there a safety program? [ ]  No [ ]  Yes – If yes, please explain:

Are employees health plans provided to employees? [ ]  No [ ]  Yes

* If yes, to which employees?
* If yes, what percentage is paid by the employer?      %

Could light duty work be accommodated for an injured employee? [ ]  No [ ]  Yes

Would the applicant need assistance in identifying light duty jobs? [ ]  No [ ]  Yes

Is there any water exposure (docks, floating docks, etc.)? [ ]  No