



Mid America Specialty Markets
2800 Forum Blvd
Suite 4B
Columbia, MO 65203
573-447-4990
agency@mail@midaminsurance.com

Bowling Center Questionnaire
(Attach to an Acord application)

Policy Number: _____

Applicant's name _____				
Address _____				
	Street	City	State	Zip
Applicant's website address _____		Contact's email address _____		

SUBMISSION REQUIREMENTS:

- Acord Applications
- Two most recent years of A) Balance Sheets and B) Income Statements
- Photos of the inside and outside of the building(s)

GENERAL LIABILITY

- 1) Number of years THIS insured has been operating a bowling center at THIS location? _____
- 2) Hours of operation during:
 - a. Weekdays: _____
 - b. Weekends: _____
 - c. Seasonal (dates closed): _____
- 3) Does the bar remain open after the bowling lanes have closed? Yes No
- 4) Does the insured inspect and disinfect rental bowling shoes after each use? Yes No
- 5) Annual gross sales from:
 - a. Bowling: \$ _____
 - b. Pro shop: \$ _____
 - c. Liquor: \$ _____
 - d. Food: \$ _____
 - e. Entertainment (i.e. concerts, bands, dancing, etc.): \$ _____
 - f. Other _____: \$ _____
- 6) What percentage of the insured's business is generated from bowling leagues? _____ %
- 7) Other activities: (check if applicable)

<input type="checkbox"/> DJ/Live Bands	<input type="checkbox"/> Entertainment	<input type="checkbox"/> Horseshoe pits
<input type="checkbox"/> Softball diamonds	<input type="checkbox"/> Slot/video poker machines	<input type="checkbox"/> Volleyball courts
<input type="checkbox"/> Other sports/athletic activities	<input type="checkbox"/> Other patron participation events(i.e. sumo wrestling, bungee, etc.)	

If yes, please explain: _____



PROPERTY

- 1) What year was the building(s) built? _____
- 2) Provide years last updated for:
 - a. Wiring _____
 - b. Roofing _____
 - c. Plumbing _____
 - d. Heating _____
- 3) Were updates full or partial? Please explain: _____
- 4) What is the roof construction material (e.g. shingles, metal)? _____
- 5) Does the roof have a bowstring truss design type? Yes No
- 6) Please list all lighting protection measures in place (e.g. Overload Circuit Breakers, In-Line Lighting Resistors, Ground Fault Circuit Interrupters, Surge Protectors): _____
- 7) Is a CCTV system used to monitor the premises? Yes No
- 8) Any flammable liquids stored on premises? Yes No
 What type and quantity? _____
- 9) Total cost per lane: (Cost includes individual lanes, ball returns, pin-setting equipment, score projectors, score tables, scoring devices, player seating, spectator benches, etc.) \$ _____
- 10) Number of lanes: _____
- 11) Do you or an outside company refinish the lanes? You Outside Company
- 12) Do you require Certificate of Insurance from refinisher? Yes No
- 13) Is refinishing material used flammable? Yes No
- 14) Do you have cooking facilities? Yes No
 - a. If yes, are all cooking surfaces covered by an UL300 Extinguishing system? Yes No
 If no, property has to be declined.
 - b. If yes, does the system have a quarterly or semi-annual cleaning and servicing contract? Yes No
 If no, property has to be declined.
 - c. Is there a 40 BC fire extinguisher in the kitchen? Yes No
 If yes, last date serviced? _____

GENERAL INFORMATION

- 1) Is there fast food delivery service available? Yes No
- 2) Have you ever had a bankruptcy or outstanding tax liens? (i.e. property tax, sales tax, unemployment tax, etc.) Yes No
 If yes, please explain: _____



The information I have provided is true and accurate to the best of my knowledge. I have not willfully concealed or misrepresented any material fact(s) or information. I understand completion of this questionnaire does not compel the company to provide coverage.

Applicant's Signature

Date

Agent's Signature

Date