

***Trusthouse Insurance, LLC.***

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**QUESTIONAIRE FOR MOTEL/HOTEL INSURANCE**

|  |  |  |
| --- | --- | --- |
| **Name of the Applicant:** | | **Fed. ID:** |
| **Ownership Name: *Individual/Corp/Partnership/LLC*:** | | |
| **Name of Motel/Hotel:** | **Contact Name:** | |
| **Location Address:** | **Mailing Address (if different):**  <gggggggggg\_Marker>  <bbbbbbbbbbb\_Marker> | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Is Property Franchise:** <ggggggggg\_Marker>**; if Yes date of Last Franchise Inspection:<Text3\_Marker>** | | | |
| **County:** <aaaaaaa\_Marker> | | **Email Address:** | |
| **Bus Ph# (**<ffffff\_Marker>**)**<fffffff\_Marker>-<ddd\_Marker> | **Cell Ph#(**<cvzzc\_Marker>**)**<vvvfd\_Marker>-<dddddddd\_Marker> | | **Fax#: (**<eeeeeee\_Marker>**)**<wwwwwww\_Marker>-<rrrrrrrr\_Marker> |
| **Proposed Effective Date:** <sssss\_Marker>**/**<zcvxx\_Marker>**/**<vvvvvvv\_Marker> | | | |

|  |  |
| --- | --- |
|  | **Building 1** |
| **Year Built** | <cccccccc\_Marker> |
| **Construct. Type** | <wwwww\_Marker> |
| **Roof type** | <eeeeeeee\_Marker> |
| **Ext. Wall Type** | <gggggggg\_Marker> |
| **No. of Units** | <jjjjj\_Marker> |
| **No. of Stories** | <kkkkkk\_Marker> |
| **Sq. Feet** | <ooooooo\_Marker> |
| **Bldg. Value** | <uuuuuu\_Marker> |
| **Contents Value** | <mmmmm\_Marker> |
| **Loss of Income** | <jjjjjjjj\_Marker> |
| **Sign Value** | <klklkl\_Marker> |
| **Corridor(Int/Ext)** | <ghgg\_Marker> |
| **Elevator(Yes/No**) | <bbbnb\_Marker> |
| **Smoke Det. Type** | <fgfff\_Marker> |
| **Heating/AC Units (Cent/Ind.)** | <hhhhhhn\_Marker> |

|  |  |  |
| --- | --- | --- |
| **Building 2** | **Building 3** | **Building 4** |
| <bhhv\_Marker> | <rrrrr\_Marker> | <Text2\_Marker> |
| <vvvbv\_Marker> | <bnnb\_Marker> | <asdffdsa\_Marker> |
| <fdfd\_Marker> | <ghg\_Marker> | <dsfafds\_Marker> |
| <bvbvcxcv\_Marker> | <hghg\_Marker> | <bzczbc\_Marker> |
| <gfggf\_Marker> | <hsdf\_Marker> | <ddsfsdfa\_Marker> |
| <dffgg\_Marker> | <vbvv\_Marker> | <dfsdsf\_Marker> |
| <dfdgfd\_Marker> | <trhtrh\_Marker> | <fdsdsf\_Marker> |
| <rrrrrre\_Marker> | <vxcv\_Marker> | <dsfdsf\_Marker> |
| <gfxffd\_Marker> | <vbvb\_Marker> | <zxvzvx\_Marker> |
| <zfdfgfg\_Marker> | <vxvbvb\_Marker> | <dsads\_Marker> |
| <ffdfg\_Marker> | <vvvxc\_Marker> | <zxvzv\_Marker> |
| <fgfg\_Marker> | <gfxfg\_Marker> | <cvzxcvzx\_Marker> |
| <vbxc\_Marker> | <fdgfdgfd\_Marker> | <cvxcvxz\_Marker> |
| <cbcc\_Marker> | <fddfdf\_Marker> | <dsdsa\_Marker> |
| <nvxc\_Marker> | <fgdfdf\_Marker> | <czxvcx\_Marker> |

**UNDERWRITING QUESTIONS**

**Update Information: If Applicable, Enter YEAR of update**

|  |  |
| --- | --- |
| **Electrical:** <dsds\_Marker> | **Roofing:** <VvVds\_Marker> |
| **Plumbing:** <dfdf\_Marker> | **Heating:** <czxf\_Marker> |

**Experience in Motel Business:** <bxcz\_Marker>**Years;** **Years at this Location**: ­<bzbz\_Marker>

In City Limits:  Distance to Fire Hydrant: <zbxzbcx\_Marker>Ft; Distance To Fire Dept. <fdfb\_Marker>Miles

Fire Alarm: Local / Central  More than 3 Claims in 3years:

Security Guard:  Security Camera:

Surge Protectors:  Sprinkler:  If Yes, Fully Partially

Peep Holes:  Room Rental: Daily Weekly Monthly Hourly

***SWIMMING POOL RELATED QUESTIONS:***

Swimming Pool:  If Yes, indooroutdoor ***if no Skip This Section***

Water Slide:  Fence around pool;  Height<jhjhjh\_Marker>Ft

***RESTAURANT SECTION:***

Is There a Restaurant or Lounge on Premises:  ***if no Skip This Section***

Is it in Separate Building:  Is there a Dance Floor:

Is Cooking Covered by Duct:  Are Filters Cleaned Weekly:

Is there UL300 Sprinkler System:  Is Restaurant Leased Out:

Is Duct cleaned every 6 months:  Is Lounge Leased Out:

Seating Capacity: <jjvk\_Marker> Is Liquor Served:

Gross Food Sale: $ <ckgckg\_Marker> Gross Liquor Sale: $ <cgkcg\_Marker>

***AMENITIES:***

Jacuzzi:  Racquet Ball:  Steam Room:

Sauna:  Beach:  Meeting Room:

Tennis Court:  Golf Course:  Exercise Room:

Play Ground:  Health Spa:  Guest Laundry:

***GENERAL LIABILITY, CRIME, WORKERS COMPENSATION:***

|  |  |
| --- | --- |
| **Annual Room Gross:** <yyt\_Marker> | **Payroll Hotel Employees:** <fsddhsf\_Marker> |
| **Payroll Clerical Employees:** <gjjgjfg\_Marker> | **Payroll Restaurant/lounge:** <hdfh\_Marker> |
| **Payroll Other:** <fffafsd\_Marker> | **Average Room Rate:** <hghh\_Marker> |
| **Total No. of Employees -- Full Time**<bvbc\_Marker> **Part Time**<xxxvn\_Marker> | |
| **Any Leased Area:** <fgaaf\_Marker> **If Yes explain:** <bnbnb\_Marker> | |

***3Year LOSS (CLAIM) INFORMATION:***

**Please also request 3year loss run history from current carrier**

***Type of Losses (Claims) Year Amount***

|  |  |  |
| --- | --- | --- |
| <hdfhdf\_Marker> | <bnbv\_Marker> | <vcxvcx\_Marker> |
| <bbvbv\_Marker> | <nvmn\_Marker> | <zxcx\_Marker> |
| <jjjgjg\_Marker> | <nbbn\_Marker> | <vcvx\_Marker> |
| <bnbcnbv\_Marker> | <rerey\_Marker> | <vcvcb\_Marker> |

***OWNERS/PARTNERS/SHARE HOLDERS INFORMATION:***

***Number Name Title Ownership % Included/Excluded in work. comp.***

1. <zcxzcx\_Marker> <ghxgh\_Marker> <vbxvcbvb\_Marker> **Included**  **Excluded**
2. <zbzbz\_Marker> <nbcbn\_Marker> <vbvbvb\_Marker> **Included**  **Excluded**
3. <vbvcvb\_Marker> <bnbn\_Marker> <fffdfd\_Marker> **Included**  **Excluded**
4. <hjhfhf\_Marker> <bvbv\_Marker> <vxcvb\_Marker> **Included**  **Excluded**

***COMMERCIAL AUTOMOBILE***

**Vehicle Info: Year**<vcxzcvxz\_Marker>**Make**: <ffdhfdfd\_Marker>**Model**: <cxzcvx\_Marker>

**Year**<sgsgd\_Marker>**Make**: <hdhd\_Marker>**Model**: <cvxz\_Marker>

***Driver Name: DOB License#/State SSN Violation***

1. <cvxzcxvz\_Marker> <gfgfhgf\_Marker> <bnb\_Marker> <ghgfhgf\_Marker> <ggffg\_Marker>
2. <gfgffg\_Marker> <cvcxv\_Marker> <uuut\_Marker> <gfhgf\_Marker> <ggfgf\_Marker>
3. <ccvxz\_Marker> <cvxcvx\_Marker> <gfgff\_Marker> <gfhgfgfh\_Marker> <ghgfgf\_Marker>

|  |  |  |
| --- | --- | --- |
| **Mortgagee** | **Loss Payee** | **Additional Insured** |
| <nbnv\_Marker> | <jkjhjh\_Marker> | <hfhdf\_Marker> |
| <kjkhk\_Marker> | <ghhg\_Marker> | <hhshsdf\_Marker> |
| <jhjk\_Marker> | <gfgfhgfh\_Marker> | <hhsdfh\_Marker> |

**Name of Current Carrier Expiring date:**

**Package** <hfhf\_Marker> <hshsd\_Marker>

**Workman’s Comp.** <hhsdfshd\_Marker> <hsdfhs\_Marker>

**Umbrella** <hhsdfhsdf\_Marker> <hhsdf\_Marker>

***OTHERS***

***Are you interested for your free Auto Insurance Quote :*** ***Yes*** ***No Expiry Date :***<Text4\_Marker>

***Are you interested for your free Home Insurance Quote :*** ***Yes*** ***No Expiry Date :***<gggg\_Marker>

***ANY ADDITIONAL NOTES/ REMARKS:*** <hsdfhsdf\_Marker>