

Small Business Hotel/Motel and Inn Supplemental Questionnaire



Customer name: _____

Customer website address (URL): _____

Please complete for each insured location

Location number: _____ of _____ Address: _____

Accommodation Type

- Hotel/motel: budget with restaurant
- Hotel/motel: economy with restaurant
- Hotel/motel: full-service with restaurant
- Historic inn
- Hotel/motel: budget, no restaurant
- Hotel/motel: economy, no restaurant
- Hotel/motel: full-service, no restaurant
- Bed and breakfast: fewer than 20 rooms

Accommodation Information

Number of rooms: _____ Average room rate: \$ _____

- Yes No Are rooms rented by the hour?
- Yes No Is there Tribal ownership or management?
- Yes No Is the location connected to a casino?
- Yes No Do guest rooms have wood-burning fireplaces?
- Yes No If yes, are the fireplaces and chimneys cleaned annually?
- Yes No Are ashes disposed of in fireproof containers?

Guest Safety

- Yes No Are there two means of egress from each floor?
 - Smoke detectors: None Hardwired Connected to a central station Battery operated How frequently are batteries replaced? _____
 - Yes No Is the front desk staffed 24/7?
- Describe other premises security (guards, cameras, etc.): _____

If security includes guards:

- Yes No Are guards armed?

Guards are: Hotel/motel employees Provided by a vendor

- Yes No If guards are provided by a vendor, is there a signed hold harmless agreement in place?

What limits of liability insurance is the vendor required to carry? \$ _____

Rooms are accessed through: Lobby External corridor with key entry Open External

Room keys are (check one): Electronic Steel

Describe key-changing procedures: _____

- Yes No Does the fire department have access from all sides? If not, describe the limitations: _____

Guest Amenities

- Yes No Restaurant on premises

If yes, complete a Small Business Restaurant Supplemental Questionnaire

Check all services offered:

- Conference/ banquet room Beauty salon Travel agency/tour booking Real estate sales Day care

Other Describe _____

Number of swimming pools: _____ Number of spas: _____

Check all that apply to pool/spas(s):

- Diving board
- Lifeguards on duty
- Fenced with self-closing gates
- Rules posted
- Entrapment preventers in place
- Emergency telephone numbers posted
- Slide greater than five feet in elevation
- Lazy river
- Other water attraction; please describe: _____

If a waterslide, diving board, wave machine or lazy river is present, complete a Water Attraction Supplemental Questionnaire

Describe any playground(s) on the property: _____

Describe any fitness center or any other recreational amenities: _____

Converted Dwelling/ Bed and Breakfast or Historic Inn Operations

(Complete only for relevant operations.)

If the inn is not open year-round, what is done to winterize it? _____

Is the inn a designated National Historic Landmark or a vintage property with unique characteristics?

Describe any unusual interior or exterior architectural betterments (e.g., turrets, lath and plaster, heavy wooden wall panels, stone or wood carvings or decorations or unusual materials):

How many rooms have wood-burning fireplaces? _____

Yes No Are the smoke alarms wired to an outside alarm audible to the manager or owner living elsewhere on the property?

Yes No Does the fire department have access from all sides? If not, describe the limitations:

Yes No If the owner or manager does not live in the main inn building are the smoke alarms wired to an outside alarm audible to the manager or owner living elsewhere on the property?

Agent or Broker Signature _____

Date _____

Add ↗

Hotels:

Yes No Is shuttle van service provided at this location? Number of vans: _____

If yes,

Describe usage:

- Airport
- Local Attractions
- Other – describe _____
- Maximum radius in miles: _____

Yes No Are motor vehicles records of all drivers reviewed for all new hires and at least annually?

Yes No Do all drivers possess the correct license for the type of vehicle as required by law?

Yes No Do you have a formal training program for drivers of your shuttle vans?

Yes No Is a formal program in place for daily visual inspection of the vans, including checking the tires?

Yes No Is there a formal, regularly scheduled maintenance program for the van(s)?

Yes No Are any of the vehicles "15 passenger type" vans?

If yes,

Yes No Do you require and enforce the use of seatbelts by all occupants?

Yes No Do you have a policy restricting maximum occupancy to 10 persons?

Yes No Do you require drivers of 15 passenger vans to obtain a Commercial Drivers License?

Yes No Do you ever rent the van out to a third party?

