

Use this checklist to find the best insurance for your restaurant or food business:

Gather Business Information	<p>Year business started: _____</p> <p>Owner's number of years in business: _____</p> <p>Claims history: _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Annual revenue (historical): _____</p> <p>Annual revenue (projected): _____</p> <p>Address: _____</p> <p>_____</p> <p>_____</p> <p>Value of kitchen equipment: _____</p> <p>Value of dining room equipment/ furnishings: _____</p> <p>Employees:</p> <p># full time: _____ # part time: _____</p>
Determine Insurance Needs	<ul style="list-style-type: none"> <input type="checkbox"/> General Liability (covers 3rd Party injuries & property damage) <input type="checkbox"/> Commercial Property (covers physical assets) <input type="checkbox"/> Business Owner's Policy (BOP) (combination General Liability & Commercial Property) <input type="checkbox"/> Workers' Compensation (covers employee injuries) <input type="checkbox"/> Food Spoilage (covers losses due to spoiled food) <input type="checkbox"/> Liquor Liability (essential if serving any type of alcohol)
Evaluate Special Coverages	<ul style="list-style-type: none"> <input type="checkbox"/> Inland Marine (covers off-site equipment) <input type="checkbox"/> Commercial Auto (if using business vehicles for events, catering, delivery) <input type="checkbox"/> Hired and Not Owned (HNOA) (covers employee-owned vehicles used for business)

Insurance Provider Comparison		
Provider 1:	Provider 2:	Provider 3:
Annual premium: _____	Annual premium: _____	Annual premium: _____
Monthly premium: _____	Monthly premium: _____	Monthly premium: _____
Deductible: _____	Deductible: _____	Deductible: _____
Payout Limits		
Aggregate: _____	Aggregate: _____	Aggregate: _____
Per-claim: _____	Per-claim: _____	Per-claim: _____
Exclusions: _____	Exclusions: _____	Exclusions: _____
_____	_____	_____
Included Coverages		
<input type="checkbox"/> General Liability <input type="checkbox"/> Property <input type="checkbox"/> BOP <input type="checkbox"/> Liquor Liability <input type="checkbox"/> Food Spoilage <input type="checkbox"/> Commercial Auto <input type="checkbox"/> Other: <input type="checkbox"/> Other: <input type="checkbox"/> Other:	<input type="checkbox"/> General Liability <input type="checkbox"/> Property <input type="checkbox"/> BOP <input type="checkbox"/> Liquor Liability <input type="checkbox"/> Food Spoilage <input type="checkbox"/> Commercial Auto <input type="checkbox"/> Other: <input type="checkbox"/> Other: <input type="checkbox"/> Other:	<input type="checkbox"/> General Liability <input type="checkbox"/> Property <input type="checkbox"/> BOP <input type="checkbox"/> Liquor Liability <input type="checkbox"/> Food Spoilage <input type="checkbox"/> Commercial Auto <input type="checkbox"/> Other: <input type="checkbox"/> Other: <input type="checkbox"/> Other:
Ratings		
Customer ratings: _____	Customer ratings: _____	Customer ratings: _____
Financial Stability Rating: _____	Financial Stability Rating: _____	Financial Stability Rating: _____
Available Extras		
<input type="checkbox"/> 24/7 customer support <input type="checkbox"/> Online portal <input type="checkbox"/> Mobile app <input type="checkbox"/> Risk management resources	<input type="checkbox"/> 24/7 customer support <input type="checkbox"/> Online portal <input type="checkbox"/> Mobile app <input type="checkbox"/> Risk management resources	<input type="checkbox"/> 24/7 customer support <input type="checkbox"/> Online portal <input type="checkbox"/> Mobile app <input type="checkbox"/> Risk management resources