



The Kingstar Company, Inc.
Storefront/Community Church Supplemental Application

APPLICATION

ALL QUESTIONS MUST BE ANSWERED AND APPLICATION MUST BE SIGNED BY APPLICANT.

Named Insured: _____

If you have a website, include your website address: _____

Number of current members _____ Number of members 5 years ago _____

Total Building Sq. Ft. _____ Parking area Sq. Ft. _____

Liability Questions

- 1) Circle all services that apply and provide details for each
School After/Before School care Youth/Recreation center Day camp Overnight camp
Cemetery Social Hall Auditorium Mom's day out Craft shows
Soup Kitchen Gymnasium Playground Athletic teams/Leagues Pool
Sponsored events Bingo/Vegas Nights Fund Raising Bazaars Fair
Medical ministry Off premises activities Missionary Day trips Job Training
Adult Daycare Other/Details _____

2) Is any of the premises leased/subleased to others? [] Yes [] No If Yes, Details _____
If yes above, do they name the applicant as additional insured? [] Yes [] No

3) Any residential facility owned? [] Yes [] No If Yes, Details _____

4) Are any products sold including food? [] Yes [] No If Yes, Details _____

5) Is alcohol served at any function on premise? [] Yes [] No If Yes, Details _____

6) Has there ever been a sexual or physical abuse claim or incident? [] Yes [] No If Yes, Decline

7) Are all exit signs illuminated on premise? [] Yes [] No If No, Decline

8) Are there two or more means of egress from the building? [] Yes [] No If No, Decline

9) Any anticipated construction of new buildings or alterations to existing structures? [] Yes [] No

10) Maximum capacity of the facility for services/events? _____

11) How many times/days during the week is church in operation? _____

12) Additional insured requests (include interest of each) _____

Nursery and Day Care: [] None

1) Maximum number of children at any one time? _____ (If over 20 children complete our daycare application)

2) Are Criminal and background checks required for nursery employees prior to employment? [] Yes [] No If no, Decline.

3) Are children allowed to be dropped off or pick up WITHOUT signing a Sign In/Out sheet? [] Yes [] No If yes, Decline

4) Are trampolines or gymnastic equipment provided in the nursery? [] Yes [] No If yes, Decline

Property Questions

1) Is the property value greater than \$500,000? [] Yes [] No If yes, Decline property

2) Is all electrical wiring on circuit breakers? [] Yes [] No If no, Decline.

3) Is there any aluminum wiring on the property? [] Yes [] No If yes, Decline.

4) Are all doors and windows locked after hours? [] Yes [] No If no, Decline.

5) Does the building meet applicable fire codes? [] Yes [] No If no, Decline.

6) Are unattended candles prohibited? [] Yes [] No If no, Decline.

7) Are all furnaces on at least an annual service contract? [] Yes [] No If no, Decline.

8) If there is a Steeple is it protected by a lightning system bearing the UL label? [] Yes [] No If no, Decline.

9) Are fire extinguisher accessible, inspected annually and clearly marked? [] Yes [] No If no, Decline.

10) Has the facility ever been protested, picketed or vandalized? [] Yes [] No If yes, Decline.

11) Is the building on a historical registrar [] Yes [] No If yes, Decline property

12) Is the property eligible according to our coastal guidelines? [] Yes [] No If No, Decline property

Construction _____ Year built _____ Protection class _____

Special form requires all utilities to be updated in the last 20 years and theft coverage requires a central station burglar alarm.

Age of roof _____ Roof [] pitched or [] flat Electrical update _____ Plumbing update _____ Heating update _____

Protective devices: (check all that apply) [] Smoke detectors [] Local alarm [] Sprinkler system covering 100% of premise

[] Central station burglar alarm [] Central station fire alarm [] Surveillance Cameras

Is there a kitchen facility [] Yes [] No If yes, list equipment, age and condition of all appliances _____

Automatic extinguishing system [] Yes [] No If yes, is it on a service contract [] Yes [] No

Read and Sign below:

I hereby state that the information provided and contained in this application is true and accurate to the best of my knowledge and that no material facts have been misrepresented or misstated.

Any person who knowingly and with intent to defraud any insurance company or other person, files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and shall be prosecuted to the full extent of the law.

Applicants Signature: _____ Date: _____