SECURITY GUARD QUESTIONNAIRE

Please answer all questions. Submit this questionnaire with a completed ACORD application and prior carrier loss runs.

Named Insured: 

Website: 

PROHIBITED CIRCUMSTANCES

If any of the questions in this section are answered “NO,” you are not eligible for coverage.

1. Is your agency and all employees licensed if required by state law?  
   - Yes  
   - No

2. Are all armed employees licensed to carry firearms?  
   - Yes  
   - No

3. Are background checks conducted on all employees?  
   - Yes  
   - No

If any of the questions in this section are answered “YES,” you are not eligible for coverage.

4. Does more than 30% of your work come from low-income or subsidized housing patrol?  
   - Yes  
   - No

GENERAL INFORMATION

1. Have you been in business more than one year?  
   - Yes  
   - No

2. Does the applicant offer any armed security guards?  
   - Yes  
   - No

3. Are any of the applicant’s guards active members of law enforcement?  
   - Yes  
   - No

4. Do any employees have arrest or detention responsibilities?  
   - Yes  
   - No
   a. If “YES,” are all of these employees trained and regularly updated on the correct procedure for doing so as well as any applicable laws?  
      - Yes  
      - No

5. What percent of the applicant’s business comes from low-income or subsidized housing security patrol?  
   - %

6. Does the applicant provide security service for any concerts or special events?  
   - Yes  
   - No

7. Does the applicant provide security services for stores with any high value merchandise?  
   - Yes  
   - No

8. Do any employees carry non-lethal weapons such as mace, pepper spray, nightsticks, or tazers?  
   - Yes  
   - No

9. The following services are not eligible for coverage:
   - Armored Car
   - Money Courier
   - Body Guards
   - Escort Services
   - Bomb Searches
   - Use of Guard Dogs
   - Labor Dispute Intermediary
   - Bouncers
   - Tactical Services (SWAT)
   - Traffic Control
   - ATM Services
   - Training for governmental agencies

   I certify that the applicant does not perform services at any of the facilities listed above:  
   - Yes – I certify this
10. Services offered at the following facility types are **not** eligible for coverage:

- Airports
- Chemical Facilities
- Banks/Financial Institutions
- Dams
- Power Plants
- Governmental Facilities
- Lakes or Reservoirs
- Liquor Stores
- Military Bases
- Taverns
- Seaports
- Nightclubs or Adult Entertainment
- Railroad Terminals/Yards
- Utilities
- Schools (Elementary – High School)
- Heavy Metal, Rap, or Hip Hop Concerts
- Restaurants (Including Fast Food)
- UFC Competitions
- Events w/ Hostile Crowds

**I certify that the applicant does not any of the services listed above:** □ Yes – I certify this

11. The following services are eligible for coverage:

- Residential Patrol
- Interior Mall Patrol
- Parking Lot Patrol
- Security Instruction/Training

12. Services offered at the following facility types are eligible for coverage:

- Churches
- Construction Sites
- Department Stores
- Hospitals
- Hotels/Motels
- Manufacturing Plants
- Offices
- Warehouses
- Vocational/Trade Schools

9. Please describe any services offered or facilities that are not listed above:

__________________________

EMPLOYEE INFORMATION

<table>
<thead>
<tr>
<th>Security Guards – Unarmed &amp; Armed (00127)*</th>
<th>Number Employed</th>
<th>Estimated Annual Payroll</th>
</tr>
</thead>
<tbody>
<tr>
<td>Security Guards – Armed (CSIC Only -00115)**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clerical and Administrative Only</td>
<td></td>
<td></td>
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<tr>
<td><strong>Total Annual Payroll</strong></td>
<td></td>
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</tbody>
</table>

*Use class 98751 in the following states: CA, FL, LA, ME, NJ, NC, TX and VT.

**Use a 2.00 IRPM on class 98751 in the following states: CA, FL, LA, ME, NJ, NC, TX and VT for firearms coverage.

For any **Private Investigator** service please complete the **Private Investigator Questionnaire**.
IMPORTANT NOTICE

I DECLARE THAT THE STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND TRUE TO THE
BEST OF MY KNOWLEDGE AFTER REASONABLE INQUIRY.

Any person who knowingly and with intent to defraud any insurance company or another person submits an
application for insurance or statement of claim containing any materially false information, or conceals for the
purpose of misleading, information containing any material fact thereto, commits a fraudulent act that is subject
to criminal and substantial civil penalties. I agree that any intentional concealment or misrepresentation of
a material fact concerning this insurance or the subject thereof may void any policy issued.

(As part of our underwriting procedures, a routine inquiry may be made to obtain applicable information
concerning character, general reputation, and credit history. Upon your written request, additional information as
to the nature and scope of the report, if one is made, will be provided.)

________________________________________  __________________________________________  __________
Applicant Signature                          Title                                      Date

________________________________________  __________________________________________
Producer Signature                          Date