



AAA Restaurant  
1701 Crain Highway, Glen Burnie, MD 21061  
**POLICY NO.:** CPP1234567

**CONTACT:** Restaurant manager.

**BUSINESS:** Insureds are the operators of a banquet hall at another location with this location being a family-type restaurant, trading as Mikie's; it was established in 1996.

Insured serves breakfast, lunch, and dinner, seven days a week.

The insured has eat-in facilities and carryout, and features homemade ice cream with a carryout window at the front for ice cream only.

Business hours are 7 a.m. to 9 p.m., Monday through Wednesday, and 7 a.m. to 10 p.m., Thursday through Sunday.

**LOSS HISTORY:** None developed.

**PUBLIC PROTECTION & EXPOSURE:** Stable, mixed commercial/residential area in Anne Arundel County. Firefighting accessibility is good at the front and rear. There is a fire company two miles from the risk, and there are adequate fire hydrants in the area.

**CONSTRUCTION:** Risk is one-story, wood frame. Exterior construction is vinyl siding over wood. The grade floor is concrete on earth, and the roof is wood construction, pitched, with an asphalt shingle cover.

Risk is one fire area, subject to 100 percent PML.

**HEAT:** Heat pump, with the compressors at the rear of the building. No deficiencies observed.

**WIRING:** Nonmetallic sheathed cable and armored cable connected to a series of 100- and 200-amp circuit breaker panels. No abuse of extension cords or temporary wiring was observed.

**PRIVATE PROTECTION:** The cooking area is protected by a Range Guard wet-chemical fire suppression system. The ductwork and filters are cleaned monthly by contract.

The fire suppression system is serviced semiannually and was serviced last in October 1999.

**LIQUOR LIABILITY:** The insured does not have a liquor license.

**BURGLARY:** Risk is protected by a central station alarm system. Magnetic contacts on the door with motion sensors inside.

There is a starting bank of \$100. The day's receipts are taken to the bank by the owners, leaving only the change in the cash register overnight.

At closing, there are always two or three employees.

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**PREMISES LIAB./LIFE SAFETY:** Egress is good at the front and rear. Lighted exit signs and emergency lights are provided.

There are tables and chairs that will accommodate 40 patrons.

The floor in the customer area is asphalt tile on concrete; level and in good condition.

Paved, lighted parking area at the front and side. There are three wooden picnic-type tables for outside dining, in good condition. The picnic tables are vulnerable to vehicular traffic with no vehicle barricades.

Overall condition of risk is considered good. Management's attitude toward the survey was good.

**RECOMMENDATIONS:**

- 2000-6-1      **MANDATORY:** The more efficient deep fat cooking appliances and use of unsaturated cooking oils dictate the use of a handheld portable fire extinguisher to cool the appliance and to prevent reflash of these very hot and difficult fires. Obtain a wet-chemical "Class K" fire extinguisher to be displayed in the kitchen area to supplement the wet-chemical fire suppression system. Fire extinguishers should be hung on the wall in an area which is visible and easily accessible, with the tops not more than five feet from the floor. Fire extinguishers must be serviced at least annually in accordance with manufacturer's recommendations, with a tag attached to indicate the date of last servicing.
- 2000-6-1      **MANDATORY:** Erect vehicle barricades/car stops between the parking spaces at the left side of the building and the spaces. Also, erect car stops between the picnic table area and the parking lot and driveway.

*Recommendations or the absence of do not identify all possible hazards. It is possible that some hazardous conditions may have been overlooked and even when reported hazards have been corrected, damages or injuries may still occur. In addition, we cannot be responsible on your behalf for your obligations under any law, rule or regulation. Continuously identifying and guarding against hazards is essential to the safety of your customer, employees and property.*

## SPECIAL RESTAURANT RIDER

### TYPE OF RESTAURANT

- |  |                                     |                                       |                                    |
|--|-------------------------------------|---------------------------------------|------------------------------------|
| <input checked="" type="checkbox"/> Full Restaurant  | <input type="checkbox"/> Dancing    | <input type="checkbox"/> Donut Shop   | <input type="checkbox"/> Franchise |
| <input type="checkbox"/> With Cocktail Lounge or bar | <input type="checkbox"/> Night Club | <input type="checkbox"/> Fast Food    | <input type="checkbox"/> Drive-In  |
| <input type="checkbox"/> With Limited Entertainment  | <input type="checkbox"/> Cafeteria  | <input type="checkbox"/> Luncheonette | <input type="checkbox"/> Seasonal  |
|  |                                     | <input type="checkbox"/> Speciality   | <input type="checkbox"/>           |

Years in Business Here 4/1/99 Days Operating 7 Seating Capacity 50  
 Does Owner Operate Yes Does Business Appear Successful Yes

Percentage of Alcoholic Beverage Sales to Total Sales NA  
 If a Drive-In, Estimated Percentage Sales Consumed in Building \_\_\_\_\_

### KITCHEN EQUIPMENT

	Number	Fuel*		Metal Hood & Duct		Filters		Frequency of Cleaning:	Hood & Duct Filters	By Owner By Contract
		Gas	Elec	Yes	No	Yes	No			
Range	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grill	<u>1</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Deep Fat Fryer	<u>2</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Broiler	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Other	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

Frequency of Cleaning: Hood & Duct Monthly Filters Monthly

	Yes	No	N/A	Clearances	Yes*	No	
Lighting in Hood Vapor Tight	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hood, ducts, cooking units less than 18" from combustible wall, floor, ceiling	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Is Deep Fat Fryer Equipped With Thermostat Hi Temp. Limit Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Do Ducts run thru concealed spaces	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Does Exhaust System run for 2 hrs after cooking units are shut down	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any Ducts over 20' long	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Is Equip and surrounding area free of grease build-up	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Minimum 16. In. Clearance Between Fryers And Surface Flames of Adjacent Equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does Ventilation over cooking area appear adequate	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

### FIRE PROTECTION

Automatic Protection over all cooking Equip  Yes  No (if no describe)

Yes  Chemical   Co<sub>2</sub>   Other   UL APPD

Name of System Grease Guard  
 Maintenance Contract Handies  
 Frequency of Service Every 6 mo  
 Date last serviced 12-99  
 Bureau App'd Installation Yes

Automatic Protection above filters and in duct, or grease extractor system  Yes  No\*

Automatic Shut-off for all gas appliances & elec deep fat fryer

Manual Operation of Automatic Protection System

Employees instructed in use of manual operation & use of portable ext.

\*If no, explain

### MISCELLANEOUS

Soiled linens kept in covered metal containers  Yes  No

Satisfactory disposal of ash tray contents   NA

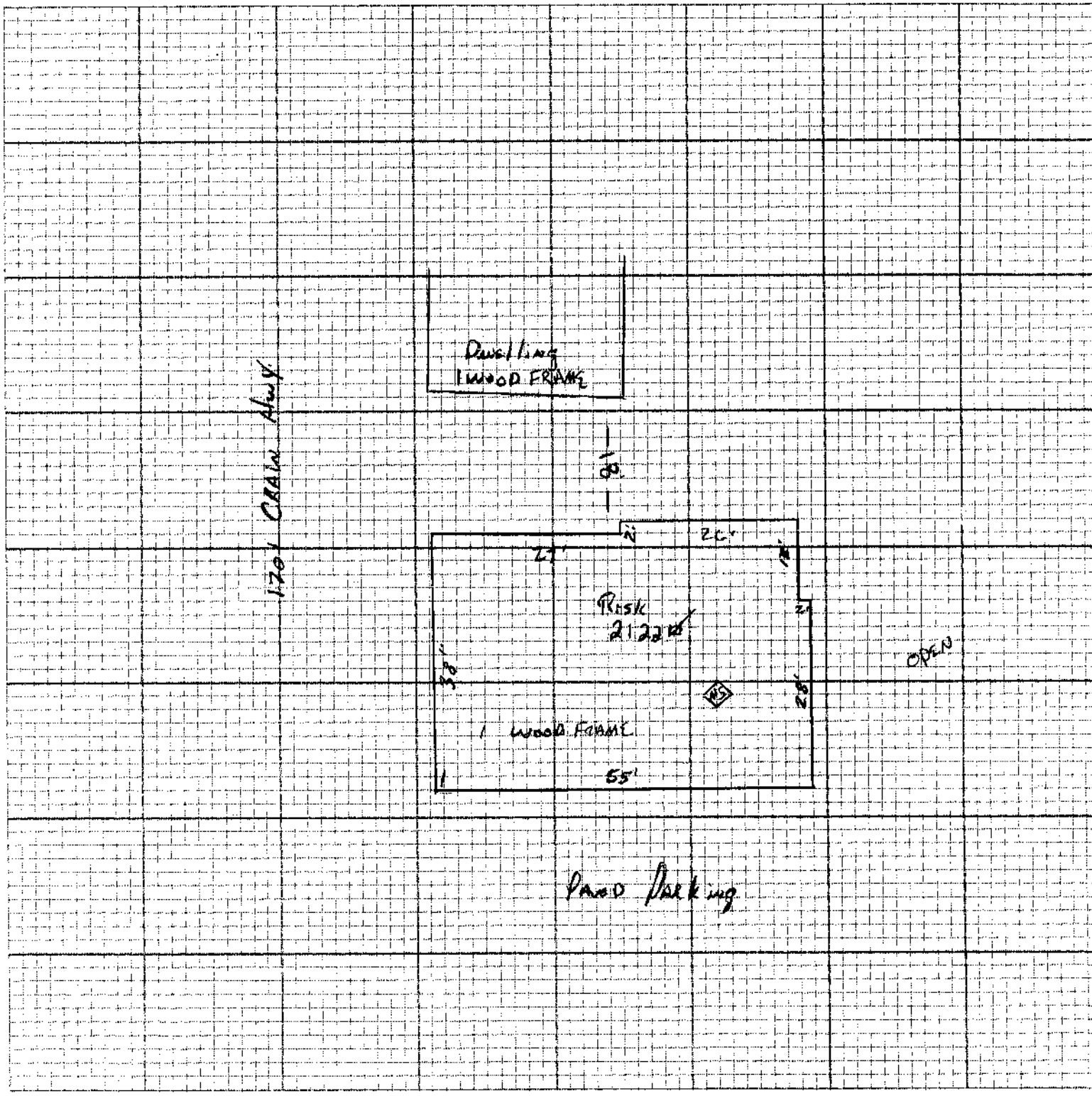
OPINION OF RISK:  Good  Fair  Poor

**SUPPLEMENTAL DIAGRAM PAGE**

ACCT. NO. 445  
POLICY NO. CPP1234567  
LOCATION 1701 Crain Highway, Glen Burnie, MD 21061

**COMMON SYMBOLS**

Windows in Basement Only	Stucco Wall	Non-Standard Shutter Or Door	Public Hydrant (Always On The Grid To Indicate Double, Triple Or Hydrant)
Windows On 1st Only	Wood Frame	Standard Shutter Or Door	Private Hydrant (Indicates 2 Outlets and Fueling Connection)
Windows On 2d Only	Wood Floor	Wood Glass-In Metal Frame	Hydrant (Always On Grid - None Attached One Outlet)
Windows On 1st & 2d	Wood Siding	Standard Wood Glass Protection, 1st Floor Only	Vertical or Staircase (Use Indicated)
Two Story With Basement	Basement		Fire Alarm Box
Opening in Basement Only	Non-Standard Fire Door		Perimeter Clock System
Opening On 1st & 2d Only	Standard Fire Door		Automatic Sprinklered Box
Best Veh. Opening 2d Only	Fire Doors On Both Sides Of Walk (One Side One Veh. Side)		Partial Installation Of Automatic Sprinklers
Structure In Category Of Non-combustible (Start)	Stairs In Assembly Or Non-combustible (Start)		Not Sprinklered Risk Or Section
Structure In Combustible (Start)	Stairs In Combustible (Start)		By Fire Department Connection
Open Next To Standard	Open Stairs		Specialty Alarm (This Indicated)
	Enclosed Stairs		



SHOW BUILDING(S) OCCUPIED OR INSURED, INCLUDING CUTOFFS DISTANCES BETWEEN BUILDING EXPOSURES, ETC., AS WELL AS LOCATION OF HYDRANTS

INDICATES NORTH



