

Section 7 – Manufacturing/Cooking Operations:

Complete Section 7 for each building that has manufacturing / cooking operations

(Check box if there are <u>NO</u> manufacturing or cooking operations and skip Section 7			
	Location/Bldg #/ Physical address:			
1.	Will there be open flame cooking and or fryer operations at the property listed on above? If yes: Are open flame cooking and/or frying operations conducted under a non-comventilation hood?		_	N/A
2.	What products do you manufacture that require open flame cooking or frying:			
3.	Does your establishment have an UL-300 compliant automatic fire suppression system wir all cooking surfaces?	th nozzles e Yes	xtended (over N/A
	If yes, what type of fire suppression system is it?			ŕ
4.	Does your cooking/frying equipment have an automatic gas/propane supply cutoff?	Yes	No	N/A
5.	Does the location list above have deep fat fryer with a high limit temperature switch?	Yes	No	N/A
6.	How often are your hoods and flues checked?			
7.	Are hoods and flues inspected/cleaned by an outside service and tagged for verification of this?	□ _{Yes} □	□ _{No}	N/A
8.	How often is your fire suppression system serviced?			
9.	Are fire suppression systems inspected/cleaned by an outside service and tagged for verification of this?	☐ _{Yes} [□ _{No}	N/A
10.	How often are the filters in your grease hood cleaned?			
11.	Have you ever had any health or liquor violations which have resulted in the closing of yo	ur business	or	
	suspension of your license in the past?	Yes	No	
12.	Will your operations include extraction of cannabis oils?	Yes	No	
	If yes, what method do you use to extract: If CO2 - how many CO2 detectors are in building?: If solvents or gases are used, open or closed loop? open closed			
13	Will your equipment be used and or rented to others who are not the named insured?	Yes	No	
	If yes, will you require them to carry their own insurance and name you on their policy?	Yes	No	
14	Is the address listed above the only location where your operations are performed?	Yes	No	
	If no, list all address and the operations performed at each of the locations. i.e. short short term kitchen or lab rentals.	t term lease	S,	