

Winery Supplemental Questionnaire – All Operations

Name of Applicant _____ Date _____

SECTION I – General Operations – This Section applies for ALL Locations (complete once at Account Level)

Total Acreage: _____ Vineyards _____ Owned _____ Leased _____

Total Gallons of Still Wine Produced Annually: _____ gallons

Does applicant custom crush for others? ____yes ____no If yes, how many gallons annually? _____ gallons

Do you bottle wine for others? ____yes ____no If yes, what is the annual revenue from bottling for others? \$_____

Do you store wine for others? ____yes ____no If yes, what is the annual payroll for wine storage? \$_____

What percentage of wine is sold retail through the tasting room? ____%

What is the capacity of the largest wine holding tank? _____gallons

Annual Sales Revenue

\$_____ Still Wine \$_____ Sparkling Wine \$_____ Harvested grapes/library wines/staged release wines

\$_____ Tasting Room Charges \$_____ Retail/Merchandise \$_____ Bed & Breakfast/Lodging

\$_____ Custom Crush for Others \$_____ Other Sales (describe): _____

Underwriting Questions

Yes	No	Premises and Alcohol Service
		Does the applicant allow tours of the winery? If yes, are the tours escorted? ____yes ____no
		Does the applicant provide on premises transportation to the general public (trams, hay wagons, etc.)?
		Are all tasting room servers and other staff responsible for serving wine certified in a formal alcohol training course (e.g. TIPS, TAM, ServSafe, etc.)?
		Does the applicant have a written policy for serving alcohol? If yes, does management review this written policy with employees on a regular basis? ____yes ____no
		Has the applicant ever been fined, cited or criminally charged in connection with improper serving of alcohol?
Yes	No	Employees
		Are employees trained in all pertinent safety protocols (i.e. chemical handling, tank cleaning, mobile equipment)?
		Does the applicant transport any of their employees? If yes, please attach a description of the modes of transportation provided, including any buses or vans over 7 passengers.
Yes	No	Off Premises Wine Storage
		Do off-site storage operators provide applicant with quarterly inventory reports of their wine products (including total number of cases/barrels stored in each building) and an annual physical inventory reconciliation?
		What type of temperature monitoring system is used at each off-site storage facility? _____
		Which type of reporting system notifies the operator and refrigeration service company? ____Local ____Central
Yes	No	Products Liability
		Does the applicant have a written quality control program and testing at each stage in the wine making process?
		Does the applicant buy and/or sell wine from other distributors or use this wine in the making of their own wine?
Yes	No	Pesticide/Herbicide Application
		Does the applicant use pesticides, herbicides, and/or fertilizers? If yes, describe _____.
		If yes, are chemicals applied by a licensed applicator?
		Do all used chemicals meet EPA and/or state regulatory guidelines?
Yes	No	Miscellaneous
		Does the applicant have backup-generators (or other backup protection) in place in the event of loss of power and failure of critical equipment and temperature control systems?

Special Events

Yes No

___ ___ Are special events held on the winery premises? If yes, please complete the following:

___ ___ Does the applicant require proof of insurance from all third parties who use the premises for special events and sign a contract that contains indemnification and hold harmless wording?

___ ___ Do you prepare and serve food for weddings or other special events?

Number of Annual Events for all locations (including events hosted by applicant or third party)

Weddings – all sizes _____ Concerts including musical festivals _____

Club Member Release Parties _____ Other music events with attendance over 50 persons _____

Regional or Appellation Events _____ All other events with attendance over 50 persons _____
(i.e. 'Barrel Tasting', Passport)

***Count each Event, not Days**

Winery Supplemental Questionnaire – Per Location

Name of Applicant _____ Date _____

SECTION II – Location Specific – Complete this section for each Scheduled Location

Location # _____ of _____

What is the dominant occupancy for this Location? ___ Winery ___ Wine Storage
 ___ Off-Site Warehouse or Wine Storage ___ Other, please describe: _____

What quantity of wine product exists or is stored at this location?

____ Average # of Cases ____ Average # of Barrels
 ____ Maximum (Peak) # of Cases ____ Maximum (Peak) # of Barrels
 ____ Average Value per Case ____ Average Value per Barrel

What is the maximum value of wine in-process at this location?

____ Average # of wine ferment tanks
 ____ Average tank volume in gallons
 ____ Average value of wine (\$/gallon)

Yes No

___ ___ Does this location have exposed plastic foam insulation? If yes, please answer the following:

Type: ___ Foil Panels ___ Spray-on Polystyrene ___ Other: _____

Distribution: ___ On Walls ___ On Ceilings ___ Both Walls & Ceilings ___ Other: _____

Yes No

___ ___ Does this location utilize refrigeration equipment? If yes, please check the fields that apply below:

Refrigerant: ___ Ammonia ___ Glycol ___ Group 1 ___ Other Type: _____ ___ Unknown
 Compressor: ___ Separated from production or storage ___ Open to production/storage ___ Unknown
 Back Up: ___ Standby power system available ___ No Standby Power System ___ Unknown
 Reliability: ___ Inspection and servicing: ___ Annually ___ Semi-Annually ___ None ___ Unknown

Yes No

___ ___ Does this location generate solar power? If yes, what is the total capacity of the system? _____ Kilowatts

Where is the solar power generated? ___ Roof ___ Fields ___ Roof & Fields ___ Other: _____

Yes No

___ ___ Is this location protected by Fire Door Protection – Building Divisions?

___ ___ Is this location protected by Power Outage Alarms (if unattended)?

Yes	No	If location is in Public Protection Class (PPC) 8 through 10, please check all that apply:
		Private water supply (tower, pond, reservoir, lake or well) - on-site with Fire Department connection
		On-Site Fire Pump - please attach description of fire pump and source of water supply
		Fire Sprinkler System - please attach description of system design and source of water supply
		Nearby pond, reservoir, lake, or well on-site without Fire Department connection
		Paid or Volunteer Fire Department Engine response with on-board water
		Multiple fire extinguishers - rechargeable and inspected annually by an independent fire protection contractor
		Multiple ingress/egress access roads to the premises
		Brush control and fire break at least 100 feet around any structure. If less than 100 feet, what distance? _____ ft