



SELF-STORAGE APPLICATION WINE STORAGE SUPPLEMENT

Please complete for each location which provides wine storage.

NAMED INSURED

Name: _____
 Location Address: _____
 City: _____ State: _____ Zip: _____

ATTACH A COPY OF THE LEASE USED FOR WINE STORAGE

Question	Yes	No	Details
Are wine storage units separated from non-wine storage?			
If separate, is the wine storage area serviced by a dedicated refrigeration system?			
Are there remote controls which monitor wine storage climate conditions? Describe.			
Is the wine storage area monitored by a video recording system?			
Are employees given access to the wine storage units? If yes, please provide details.			
Do you run background checks on tenants seeking wine storage?			
Does tenant file a list of all wines in storage?			
Describe procedures you follow if wine tenant does not pay the rent on the wine storage unit.			
Does the facility accept deliveries of wine? If yes, provide details.			
Do you have back-up generators which maintain wine storage climate?			
Is wine ever consumed on the insured premises? If yes please explain.			