

**The Mahoney Group**  
**Hotel Motel Program Restaurant Application**

Name of Business

Address if different than hotel:

City  State  Zip

Location phone number

Contact Person

**Location General Information:**

Food \$

Liquor \$

Owner Operated Y  N

Name of Lessee

Years of Experience of Lessee

Seating Capacity

Restaurant sq ft

**Type of operation**

Full Service Y  N

Continental Y  N

Take Out Y  N

Room Service Y  N

**Protective Service information:**

Fire Extinguishers

40 BC Kitchen Y  N

ABC Elsewhere Y  N

Automatic Chemical Extinguishing systems

Hoods Y  N

Exhaust Ducts Y  N

Deep Fat Fryer Y  N

Cook Surface Y  N

Automatic Fuel Shutoff Feature

Cook Surfaces Y  N

Deep Fat Fryer Y  N

Cleaning Information

Bathroom on Rotation basis Y  N

General Areas on Rotation Y  N

Parking Lot Y  N

Flues (professionally) Y  N

Filters Y  N

How often?