CORY WASHINGTON & CO.

SMARTER RISK. STRONGER BUSINESS.

Covers retail bakeries, cake shops, and donut and pastry shops, including custom-cake delivery and wholesale to cafes. Large wholesale bakeries also complete CWCO-SUP-FOODMFG. Complete with ACORD 125, 126, and 140.

1 APPLICANT / BUSINESS INFORMATION

LEGAL BUSINESS NAME | DBA | FEIN | YEARS IN BUSINESS

BUSINESS ADDRESS | CITY / STATE / ZIP | WEBSITE

Entity type:
☐ Sole proprietor ☐ Partnership ☐ LLC ☐ Corporation

PRIMARY CONTACT / TITLE | PHONE | EMAIL

HEALTH PERMIT / FOOD LICENSE NO. | COTTAGE FOOD LICENSE (IF HOME-BASED)

2 OPERATIONS

RECEIPTS CATEGORY	ANNUAL AMOUNT ($)	% OF TOTAL

Categories: food; beer and wine; liquor; catering and events; retail and merchandise; delivery; other.

Products (check all that apply):
☐ Breads ☐ Cakes and custom cakes ☐ Pastries ☐ Donuts (fried) ☐ Gluten-free or allergen-free items ☐ Wholesale to other businesses

2-1 Does the bakery make products it markets as gluten-free, nut-free, or allergen-free? ☐ Yes ☐ No
IF YES, EXPLAIN

2-2 Does the bakery deliver or set up cakes at events? ☐ Yes ☐ No
IF YES, EXPLAIN

2-3 Does the bakery sell packaged items wholesale to other stores? ☐ Yes ☐ No
IF YES, EXPLAIN

3 EXPOSURE & RISK QUESTIONS — ALLERGENS, LABELING & CROSS-CONTACT

Bakeries move nuts, wheat, eggs, milk, soy, and sesame through the same mixers and ovens. Sesame became a federally required allergen label in 2023, and a mislabeled or cross-contacted item can cause anaphylaxis.

3-1 Does every packaged item list ingredients and all major allergens, including sesame? ☐ Yes ☐ No
IF YES, EXPLAIN

3-2 Is allergen information available for every unpackaged item at the counter? ☐ Yes ☐ No
IF YES, EXPLAIN

3-3 If yes to 2-1, are allergen-free products made on separate equipment or after a documented full cleaning? ☐ Yes ☐ No
IF YES, EXPLAIN

3-4 If yes to 2-1, are allergen-free claims verified by testing or certification? ☐ Yes ☐ No
IF YES, EXPLAIN

3-5 Are labels checked against recipes whenever a recipe or supplier changes? ☐ Yes ☐ No
IF YES, EXPLAIN

3-6 Has a customer claimed an allergic reaction or illness from a product? ☐ Yes ☐ No

IF YES, EXPLAIN

4 EXPOSURE & RISK QUESTIONS — OVENS, FRYERS, FLOUR DUST & DELIVERY

4-1 Are fryers under a hood with fire suppression? ☐ Yes ☐ No
IF YES, EXPLAIN

4-2 Are ovens and proofers serviced on a schedule? ☐ Yes ☐ No
IF YES, EXPLAIN

4-3 Is flour dust controlled (dust collection, careful dumping, cleaning) to limit fire and asthma risk? ☐ Yes ☐ No
IF YES, EXPLAIN

4-4 If yes to 2-2, are delivery drivers' records checked and personal auto business use confirmed? ☐ Yes ☐ No
IF YES, EXPLAIN

4-5 Are mixers fitted with bowl guards and interlocks? ☐ Yes ☐ No
IF YES, EXPLAIN

4-6 Are mixers locked out before cleaning? ☐ Yes ☐ No
IF YES, EXPLAIN

5 PAYROLL & RECEIPTS

TOTAL ANNUAL PAYROLL ($)

ANNUAL GROSS RECEIPTS ($)

WHOLESALE RECEIPTS ($)

6 PRIOR INSURANCE & LOSS HISTORY

Attach currently valued loss runs for the last 5 years.

GL / PRODUCTS CARRIER / LIMITS

PROPERTY / SPOILAGE COVERAGE

HIRED & NON-OWNED AUTO (Y / N)

6-1 Has any carrier declined, cancelled, or non-renewed coverage in the last 5 years? ☐ Yes ☐ No
IF YES, EXPLAIN

DATE OF LOSS	DESCRIPTION	TOTAL INCURRED ($)	OPEN / CLOSED

6-2 Is the applicant aware of any incident, complaint, or circumstance not yet resulting in a claim that could reasonably give rise to one? ☐ Yes ☐ No
IF YES, EXPLAIN

7 RISK MANAGEMENT

7-1 Are staff trained to answer allergen questions using written ingredient information? ☐ Yes ☐ No
IF YES, EXPLAIN

7-2 Are custom-cake orders confirmed in writing, including allergens? ☐ Yes ☐ No
IF YES, EXPLAIN

8 SIGNATURE & FRAUD WARNING

The undersigned declares that the statements and answers given in this supplemental are true, complete and correct to the best of their knowledge, and that no material fact has been withheld or misstated. The applicant agrees that this supplemental, together with all ACORD applications and attachments, forms the basis of any submission to insurers and may be relied upon by them. Signing this supplemental does not bind coverage. This supplemental is an intake document prepared by Cory Washington & Co. LLC to support carrier submission; it does not itself provide coverage.

FRAUD NOTICE: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information, or conceals for the purpose of misleading information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties. (State-specific fraud warnings apply; see state amendatory notice.)

APPLICANT / AUTHORIZED SIGNATURE (TYPE FULL NAME)	TITLE	DATE

PRODUCER — CORY WASHINGTON & CO. LLC	PRODUCER SIGNATURE (TYPE FULL NAME)	DATE