

Covers bed & breakfasts and small inns, typically owner-occupied, serving breakfast or other meals. Hotels use CWCO-SUP-LODG; whole-home vacation rentals CWCO-SUP-VACATION. Complete with ACORD 125, 126, and 140. Attach photos of guest rooms, stairs, and exits.

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

LODGING / INNKEEPER LICENSE NO.	FOOD SERVICE PERMIT NO. (IF ANY)

2 OPERATIONS

GUEST ROOMS	YEAR BUILT	STORIES	OCCUPANCY (%)

Meals and services (check all that apply):
☐ Breakfast only ☐ Other meals ☐ Alcohol served ☐ Events or weddings ☐ Hot tub or pool ☐ Bicycles or kayaks for guests

2-1 Does the owner or an innkeeper live on the premises? ☐ Yes ☐ No
 IF YES, EXPLAIN

2-2 Is the building on a historic register or in a historic district? ☐ Yes ☐ No
 IF YES, EXPLAIN

2-3 Is the property insured on a commercial policy written for B&B or inn use? ☐ Yes ☐ No
 IF YES, EXPLAIN

3 EXPOSURE & RISK QUESTIONS — OLDER HOMES, ESCAPE ROUTES & FIRE SAFETY

A bed & breakfast puts paying guests to sleep in a house built for family use — often older, with residential wiring, steep stairs, fireplaces, and bedrooms far from exits. Small lodgings frequently lack hotel-grade detection and escape routes.

SYSTEM	YEAR LAST UPDATED	% UPDATED

Systems: roof; electrical; plumbing; HVAC / PTACs.

Adverse conditions present (check all that apply):
☐ Aluminum wiring ☐ Knob-and-tube wiring ☐ Federal Pacific / Stab-Lok panels ☐ Polybutylene plumbing ☐ None of these

3-1 Does every guest room have a working smoke alarm? ☐ Yes ☐ No
 IF YES, EXPLAIN

3-2 Does every guest room with fuel-burning appliances or near an attached garage have a carbon monoxide alarm? ☐ Yes ☐ No
 IF YES, EXPLAIN

3-3 Is there a central-station monitored fire alarm? ☐ Yes ☐ No
 IF YES, EXPLAIN

3-4 Are exits marked with illuminated signs and emergency lighting? ☐ Yes ☐ No
 IF YES, EXPLAIN

3-5	Are smoke alarms interconnected so one alarm sounds throughout the house?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-6	Does every guest room have a window or door that allows emergency escape?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-7	Is an evacuation map posted inside every guest room?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-8	Are fireplaces and chimneys inspected and cleaned at least yearly?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-9	Are stairs fitted with handrails and lighting that meet code?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-10	Has the property had a fire, carbon monoxide event, or guest fall in the last 5 years?	☐ Yes ☐ No
IF YES, EXPLAIN		

4 EXPOSURE & RISK QUESTIONS — FOOD SERVICE & GUEST HEALTH

4-1	Are guests asked about food allergies before arrival?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-2	Is the kitchen trained to prevent allergen cross-contact?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-3	Does the person preparing food hold a food-handler certificate?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-4	Has the local health department inspected the kitchen where required?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-5	If a hot tub is offered, is its chemistry tested and logged daily?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-6	Has a guest claimed a food reaction or illness?	☐ Yes ☐ No
IF YES, EXPLAIN		

5 EXPOSURE & RISK QUESTIONS — GUEST PROPERTY, ALCOHOL & ACTIVITIES

5-1	Is a safe offered for guest valuables?	☐ Yes ☐ No
IF YES, EXPLAIN		
5-2	Is the state's innkeeper liability notice posted in every guest room?	☐ Yes ☐ No
IF YES, EXPLAIN		
5-3	If alcohol is served, does the property hold the required license and liquor liability coverage?	☐ Yes ☐ No
IF YES, EXPLAIN		
5-4	If bicycles or kayaks are provided, do guests sign a release?	☐ Yes ☐ No
IF YES, EXPLAIN		
5-5	If bicycles or kayaks are provided, are helmets and life jackets supplied?	☐ Yes ☐ No
IF YES, EXPLAIN		

6 REVENUE & VALUES

ANNUAL ROOM REVENUE (\$)	FOOD / EVENT REVENUE (\$)	TOTAL INSURED VALUES (\$)

7 PRIOR INSURANCE & LOSS HISTORY

Attach currently valued loss runs for the last 5 years.

CURRENT PROPERTY / GL CARRIER

LIQUOR LIABILITY (Y / N)

UMBRELLA LIMIT

7-1 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

7-2 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

8 RISK MANAGEMENT

8-1 Is a snow and ice removal plan in place for walks and parking?

☐ Yes ☐ No

IF YES, EXPLAIN

8-2 Are guest rooms inspected for hazards between every stay?

☐ Yes ☐ No

IF YES, EXPLAIN

9 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