

For licensed on-site cannabis consumption lounges, tasting rooms, cannabis cafes, and licensed cannabis events. Dispensaries use CWCO-SUP-CANN and bars use CWCO-SUP-BARTAVERN. Complete with ACORD 125, 126, and 140. Attach the state and local consumption license, the house rules and patron waiver, the ventilation design, the security plan, and five years of loss runs.

1 APPLICANT / BUSINESS INFORMATION

LEGAL BUSINESS NAME	DBA	FEIN	YEARS IN BUSINESS
LOUNGE ADDRESS	CITY / STATE / ZIP	WEBSITE	

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

PRIMARY CONTACT / TITLE	PHONE	EMAIL

STATE CONSUMPTION LICENSE NUMBER	LOCAL PERMIT NUMBER

1-1 Is the lounge attached to or owned by a dispensary? ☐ Yes ☐ No
 IF YES, EXPLAIN

2 OPERATIONS

Consumption allowed (check all that apply):
☐ Smoking flower ☐ Vaping ☐ Dabbing / concentrates ☐ Edibles ☐ Beverages ☐ Bring-your-own cannabis

Other activities (check all that apply):
☐ Food service ☐ Alcohol (where allowed) ☐ Live music / events ☐ Yoga, art, or classes ☐ Off-site licensed events
☐ Tours / transportation

Size and volume:
 Seating capacity Visits per year Employees Hours open per week

2-1 Does the lounge sell cannabis products on site? ☐ Yes ☐ No
 IF YES, EXPLAIN

2-2 Does the lounge stay open past midnight? ☐ Yes ☐ No
 IF YES, EXPLAIN

3 EXPOSURE & RISK QUESTIONS — OVERCONSUMPTION & IMPAIRED PATRONS

Some states now let injured people sue lounges that serve visibly impaired patrons or minors, much like bar dram shop laws. Edibles take effect slowly, and an impaired patron who drives away can bring third-party claims that waivers do not stop.

3-1 Is every patron's ID checked at the door? ☐ Yes ☐ No
 IF NO, EXPLAIN

3-2 Are edible and beverage servings limited per patron per visit? ☐ Yes ☐ No
 IF NO, EXPLAIN

3-3 Are first-time patrons told about delayed edible effects? ☐ Yes ☐ No
 IF NO, EXPLAIN

3-4 Are staff trained to stop service to visibly impaired patrons? ☐ Yes ☐ No
 IF NO, EXPLAIN

3-5 Does the lounge arrange rides home for impaired patrons? ☐ Yes ☐ No
 IF NO, EXPLAIN

3-6 Is there a written plan for patrons who become ill, anxious, or faint? ☐ Yes ☐ No
 IF NO, EXPLAIN

3-7 Is alcohol served alongside cannabis? ☐ Yes ☐ No
IF YES, EXPLAIN

3-8 Does every patron sign a waiver? ☐ Yes ☐ No
IF NO, EXPLAIN

3-9 Are incidents involving impaired patrons logged? ☐ Yes ☐ No
IF NO, EXPLAIN

4 EXPOSURE & RISK QUESTIONS — FACILITY, SMOKE & SECURITY

4-1 Was the ventilation system designed by an engineer for smoke and vapor removal? ☐ Yes ☐ No
IF NO, EXPLAIN

4-2 Are smoking areas separated from food preparation and staff break areas? ☐ Yes ☐ No
IF NO, EXPLAIN

4-3 Are open flames, torches, or dab rigs used on site? ☐ Yes ☐ No
IF YES, EXPLAIN

4-4 Is the building sprinklered? ☐ Yes ☐ No
IF NO, EXPLAIN

4-5 Are security guards on site during business hours? ☐ Yes ☐ No
IF NO, EXPLAIN

4-6 Is there monitored video surveillance of all patron areas? ☐ Yes ☐ No
IF NO, EXPLAIN

4-7 Is cash kept in a safe until it is deposited? ☐ Yes ☐ No
IF NO, EXPLAIN

4-8 Do product suppliers carry products liability insurance naming the lounge? ☐ Yes ☐ No
IF NO, EXPLAIN

5 PAYROLL, SALES & REVENUE

ANNUAL REVENUE (\$)	CANNABIS SALES (\$)	FOOD AND EVENT REVENUE (\$)	TOTAL ANNUAL PAYROLL (\$)

6 PRIOR INSURANCE & LOSS HISTORY

Attach currently valued loss runs for the last 5 years.

GL CARRIER / LIMITS	CANNABIS LIABILITY CARRIER / LIMIT	EXPIRATION DATE

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

6-1 Does the current GL policy exclude cannabis or consumption-lounge activity? ☐ Yes ☐ No
IF YES, EXPLAIN

6-2 Has a patron been involved in a crash or injury after leaving the lounge? ☐ Yes ☐ No
IF YES, EXPLAIN

6-3 Has the lounge been cited by a regulator? ☐ Yes ☐ No
IF YES, EXPLAIN

6-4 Has any coverage been declined, cancelled, or non-renewed? ☐ Yes ☐ No
IF YES, EXPLAIN

6-5 Is the applicant aware of any incident or circumstance that could give rise to a claim? ☐ Yes ☐ No
IF YES, EXPLAIN

7 RISK MANAGEMENT & SAFETY

7-1 Are house rules posted and explained to every patron? ☐ Yes ☐ No
IF NO, EXPLAIN

7-2 Are staff trained in first aid? ☐ Yes ☐ No
IF NO, EXPLAIN

7-3 Are video recordings kept for at least 30 days? ☐ Yes ☐ No
IF NO, 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, may be committing a fraudulent insurance act, which is a crime and may subject such person to criminal and civil penalties. State-specific fraud warnings appear on the insurer's application.

APPLICANT / AUTHORIZED SIGNATURE (TYPE FULL NAME)	TITLE	DATE
PRODUCER — CORY WASHINGTON & CO. LLC	PRODUCER SIGNATURE (TYPE FULL NAME)	DATE