

Covers stand-alone crematories and direct cremation providers — human cremation, alkaline hydrolysis, pet cremation, removal and transport, and cremation for medical schools and hospitals. Full-service funeral homes use CWCO-SUP-FUNERAL; cemeteries CWCO-SUP-CEMETERY. Complete with ACORD 125, 126, and 127. Attach state licenses, the air permit, and chain-of-custody procedures.

1 APPLICANT / BUSINESS INFORMATION

LEGAL BUSINESS NAME

DBA

FEIN

YEARS IN BUSINESS

CREMATORY ADDRESS

CITY / STATE / ZIP

WEBSITE

Entity type:

☐ Sole proprietor

☐ Partnership

☐ LLC

☐ Corporation

☐ Other

PRIMARY CONTACT / TITLE

PHONE

EMAIL

STATE CREMATORY LICENSE / AIR PERMIT NO.

CERTIFIED OPERATORS (CANA / OTHER)

2 OPERATIONS

Services (check all):

☐ Human cremation for funeral homes

☐ Direct cremation to families

☐ Alkaline hydrolysis

☐ Pet cremation

☐ Removal / transport

☐ Body donation / medical schools

☐ Online arrangements

Size:

Retorts / units

Cremations per year

Pet cremations per year

Refrigerated holding capacity

Removal vehicles

Employees

CLIENT TYPE	% OF VOLUME

Client types: funeral homes (trade work); families (direct cremation); hospitals / medical examiners; medical schools / body donation; veterinarians / pet owners.

3 EXPOSURE & RISK QUESTIONS — IDENTIFICATION & CUSTODY OF REMAINS

A Colorado judge ordered \$950 million in 2024 after about 190 bodies were found decaying at a funeral home and some families received fake ashes.

3-1 Is a numbered ID tag or disc kept with every body from intake through return of remains?

☐ Yes

☐ No

IF YES, EXPLAIN

3-2 Is identity verified by family or a second person before cremation?

☐ Yes

☐ No

IF YES, EXPLAIN

3-3 Is written authorization from the legal next of kin on file before every cremation?

☐ Yes

☐ No

IF YES, EXPLAIN

3-4 Are bodies held in refrigeration if not cremated within 24 hours?

☐ Yes

☐ No

IF YES, EXPLAIN

3-5 Are pet and human cremations done in separate units?

☐ Yes

☐ No

IF YES, EXPLAIN

3-6 Has a family claimed they received the wrong remains or that remains were mishandled?

☐ Yes

☐ No

IF YES, EXPLAIN

3-7 Is any cremation outsourced to another crematory?

☐ Yes

☐ No

IF YES, EXPLAIN

4 EXPOSURE & RISK QUESTIONS — EQUIPMENT, EMISSIONS & NEIGHBORS

New York's Attorney General sued to permanently block a crematory over repeated air violations and neighbors' soot and odor complaints.

4-1	Are retorts maintained by the manufacturer or a qualified service company on a schedule?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-2	Has a retort fire, chimney fire, or flashback occurred in the last 10 years?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-3	Are pacemakers and other implants removed before cremation?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-4	Has a regulator cited the crematory for emissions, opacity, or permit violations?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-5	Have neighbors complained about smoke, odor, or noise?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-6	Do employees lift and move bodies without lifts or assist devices?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-7	Do contracts with funeral homes require the crematory to indemnify them?	☐ Yes ☐ No
IF YES, EXPLAIN		

5 PAYROLL, SALES & REVENUE

TOTAL ANNUAL PAYROLL (\$, ILLUSTRATIVE)	NUMBER OF EMPLOYEES	REMOVAL DRIVER PAYROLL (\$)
ANNUAL REVENUE (\$, ILLUSTRATIVE)	DIRECT-TO-FAMILY REVENUE (\$)	PET CREMATION REVENUE (\$)

6 PRIOR INSURANCE & LOSS HISTORY

Attach currently-valued loss runs for the last 5 years.

CURRENT CARRIER	LIMIT / DEDUCTIBLE	EXPIRATION DATE
6-1	Has any carrier declined, cancelled, or non-renewed coverage for this business in the last 5 years?	☐ Yes ☐ No
IF YES, EXPLAIN		
6-2	Has a state board disciplined the crematory or its operators?	☐ Yes ☐ No
IF YES, EXPLAIN		

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

6-3	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 & SAFETY

7-1

Is there a written chain-of-custody procedure with a log signed at each step?

☐ Yes ☐ No

IF YES, EXPLAIN

7-2

Are operators certified and trained on retort safety and emergency shutdown?

☐ Yes ☐ No

IF YES, EXPLAIN

7-3

Are records and logs kept for at least the period state law requires?

☐ 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