

Covers delis and sandwich shops, including meats and cheeses sliced to order, prepared salads and grab-and-go items, catering, and in-house curing or smoking. Complete with ACORD 125/126/140. Attach the health permit and most recent inspection report.

1 APPLICANT / BUSINESS INFORMATION

LEGAL BUSINESS NAME

DBA / SHOP NAME

FEIN

YEARS IN BUSINESS

SHOP ADDRESS

CITY / STATE / ZIP

WEBSITE

Entity type:

☐ Sole proprietor

☐ Partnership

☐ LLC

☐ Corporation

PRIMARY CONTACT / TITLE

PHONE

EMAIL

HEALTH PERMIT NO.

FRANCHISE BRAND (IF ANY)

2 OPERATIONS

DESCRIPTION OF OPERATIONS (MENU, DELI COUNTER VS. MADE-TO-ORDER SANDWICHES, SEATING, CATERING, HOURS)

Operations (check all that apply):

☐ Made-to-order sandwiches

☐ Meats and cheeses sliced to order

☐ House-made salads

☐ Grab-and-go packaged items

☐ Catering

☐ In-house curing / smoking

☐ Beer or wine service

REVENUE SOURCE	% OF ANNUAL REVENUE

Sources: dine-in / takeout; deli counter sales by the pound; catering; delivery apps; alcohol.

Size and volume:

Locations

Meat slicers

Seats

Catering events per month

Employees

3 EXPOSURE & RISK QUESTIONS — LISTERIA & FOOD SAFETY

The 2024 Boar's Head Listeria outbreak involved meats sliced at deli counters and caused at least 9 deaths. CDC found about half of delis do not fully clean slicers every 4 hours and 3 in 5 had damaged slicers.

3-1 Are in-use slicers fully disassembled, cleaned, and sanitized at least every 4 hours, with a written log?

☐ Yes ☐ No

IF YES, EXPLAIN

3-2 Are slicers inspected for cracks, worn gaskets, and damaged parts, with damaged slicers removed from service?

☐ Yes ☐ No

IF YES, EXPLAIN

3-3 Are cold-holding temperatures (41 F or below) logged at least twice daily for every refrigerator and display case?

☐ Yes ☐ No

IF YES, EXPLAIN

3-4 Are opened deli meats, salads, and ready-to-eat foods date-marked and discarded within the Food Code limit?

☐ Yes ☐ No

IF YES, EXPLAIN

3-5	Is raw meat stored separately from and below ready-to-eat foods, with separate knives and boards?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-6	Is sanitizer concentration tested with test strips each shift?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-7	Is there a written procedure to pull product immediately when a supplier issues a recall?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-8	If meats are cured or smoked in house, does the operation have a HACCP plan or health-department variance?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-9	Are allergens (including sesame) labeled on grab-and-go items and disclosed for made-to-order food?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-10	In the past 5 years, has the shop had a foodborne illness complaint, health-department closure, or outbreak investigation?	☐ Yes ☐ No
IF YES, EXPLAIN		

4 EXPOSURE & RISK QUESTIONS — SLICERS, KNIVES & YOUNG WORKERS

Federal child labor law bars employees under 18 from operating or cleaning power-driven meat slicers. A Memphis sandwich shop was fined \$17,818 after a 16-year-old's thumb injury revealed minors running slicers daily.

4-1	Are employees under 18 prohibited from operating or cleaning meat slicers, and is this enforced and documented?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-2	Are cut-resistant gloves required for slicing and cleaning blades?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-3	Are slicers unplugged and blade guards in place before cleaning?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-4	Are slicer operators trained and signed off before working alone?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-5	In the past 5 years, has any employee suffered a laceration or amputation requiring medical treatment?	☐ Yes ☐ No
IF YES, EXPLAIN		

5 EXPOSURE & RISK QUESTIONS — CATERING & DELIVERY

5-1	For catering, is hot and cold holding maintained during transport and service, with time limits for food left out?	☐ Yes ☐ No
IF YES, EXPLAIN		
5-2	Do employees deliver catering or orders in company or personal vehicles?	☐ Yes ☐ No
IF YES, EXPLAIN		
5-3	Is alcohol served or provided at catered events?	☐ Yes ☐ No
IF YES, EXPLAIN		

6 PAYROLL, SALES & REVENUE

TOTAL ANNUAL PAYROLL (\$, ILLUSTRATIVE)	NUMBER OF EMPLOYEES	NUMBER OF EMPLOYEES UNDER 18
PROJECTED ANNUAL GROSS SALES (\$, ILLUSTRATIVE)	PRIOR YEAR SALES (\$, ILLUSTRATIVE)	CATERING SALES (\$, ILLUSTRATIVE)

7 PRIOR INSURANCE & LOSS HISTORY

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

CURRENT GL / PROPERTY CARRIER

CURRENT GL LIMITS

PRODUCTS AGGREGATE

7-1 Has any carrier declined, cancelled, or non-renewed coverage for this operation in the last 5 years?

☐ Yes ☐ No

IF YES, EXPLAIN

DATE OF LOSS	DESCRIPTION	TOTAL INCURRED (\$, ILLUSTRATIVE)	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 & SAFETY

8-1 Is at least one certified food protection manager on duty during all hours of operation?

☐ Yes ☐ No

IF YES, EXPLAIN

8-2 Are employees excluded from work when ill with vomiting, diarrhea, or a diagnosed foodborne illness?

☐ Yes ☐ No

IF YES, EXPLAIN

8-3 Are supplier invoices and lot information kept so recalled products can be traced?

☐ 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