

Covers dog trainers and obedience schools: group classes, private lessons, in-home training, board-and-train programs, behavior modification for reactive or aggressive dogs, and service, protection, or sport training. Separate boarding, daycare, grooming, or walking businesses need their own applications. Complete with ACORD 125/126. Attach the client agreement and waiver and the vaccination policy.

1 APPLICANT / BUSINESS INFORMATION

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

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

PRIMARY CONTACT / TITLE	PHONE	EMAIL

Trainer certifications held (check all that apply):
☐ CPDT-KA / CPDT-KSA ☐ IAABC ☐ KPA-CTP ☐ CCPDT behavior (CBCC-KA) ☐ Other ☐ None

2 OPERATIONS

DESCRIPTION OF OPERATIONS (TRAINING METHODS, FACILITY VS. IN-HOME, TYPICAL DOGS AND CLIENTS)

SERVICE	% OF ANNUAL REVENUE

Services: group obedience classes; private lessons at facility; in-home training; board-and-train; reactive / aggressive dog behavior work; service or therapy dog training; protection / bite work; dog sports (agility, dock diving); daycare or boarding.

Size and volume:

Dogs trained per year Max dogs in a group class Board-and-train dogs at once (max) Trainers Locations

2-1 Does the applicant transport client dogs in its own vehicles? ☐ Yes ☐ No
IF YES, EXPLAIN

2-2 Does the applicant use 1099 or contract trainers? ☐ Yes ☐ No
IF YES, EXPLAIN

3 EXPOSURE & RISK QUESTIONS — DOGS IN CARE (BOARD-AND-TRAIN)

Board-and-train dogs have died in trainers' care, leading to lawsuits and animal cruelty charges. General liability usually does not cover injury to or loss of a client's dog in the business's care; that requires animal bailee coverage.

3-1 Are dogs in board-and-train housed on site, in a trainer's home, or elsewhere, and is housing licensed or inspected where required? ☐ Yes ☐ No
IF YES, EXPLAIN

3-2 Are dogs supervised or checked on a documented schedule, including overnight? ☐ Yes ☐ No
IF YES, EXPLAIN

3-3	Are intake weight and condition recorded, with weight, feeding, and health logged daily?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-4	Do owners receive regular updates and the right to visit or check on their dog during the program?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-5	Is there a written plan for veterinary emergencies, including a relationship with a nearby vet and owner authorization for treatment?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-6	Are kennels and crates sized correctly and checked for hazards where a dog could become stuck or injured?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-7	Is heat exposure controlled (climate control, no dogs left in vehicles, limits on outdoor work in heat)?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-8	Are vaccinations (rabies, distemper, parvovirus, bordetella) verified before every dog's first session or stay?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-9	In the past 5 years, has any client's dog died, escaped, or been seriously injured in the applicant's care?	☐ Yes ☐ No
IF YES, EXPLAIN		

4 EXPOSURE & RISK QUESTIONS — BITES, AGGRESSION & METHODS

4-1	Does the applicant work with dogs that have a bite history or are reactive or aggressive?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-2	Is a behavior history and bite history taken at intake, with high-risk dogs screened out of group classes?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-3	Are dogs separated and leashed in group classes, with limits on dog-to-dog contact?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-4	Does the applicant use prong, shock, or e-collars, and is their use disclosed to and approved by owners in writing?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-5	Does the applicant offer protection, bite, or attack training?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-6	Are minors allowed to handle dogs in classes, and under what supervision?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-7	In the past 5 years, has any dog bitten a person or another dog during training, or has a trained dog later caused a claim?	☐ Yes ☐ No
IF YES, EXPLAIN		

5 EXPOSURE & RISK QUESTIONS — PROFESSIONAL & CLIENT CONTRACTS

5-1	Does every client sign a written agreement and waiver describing methods, risks, and that results are not guaranteed?	☐ Yes ☐ No
IF YES, EXPLAIN		
5-2	Does the applicant train or certify service dogs, and does marketing avoid promising public-access rights or certifications the law does not provide?	☐ Yes ☐ No
IF YES, EXPLAIN		
5-3	Does the applicant offer refunds or re-training guarantees, and are they written?	☐ Yes ☐ No
IF YES, EXPLAIN		
5-4	In the past 5 years, has a client claimed the training was ineffective, caused behavior problems, or harmed the dog?	☐ Yes ☐ No
IF YES, EXPLAIN		

6 PAYROLL, SALES & REVENUE

TOTAL ANNUAL PAYROLL (\$, ILLUSTRATIVE)	NUMBER OF W-2 TRAINERS / STAFF	NUMBER OF 1099 TRAINERS
PROJECTED ANNUAL GROSS REVENUE (\$, ILLUSTRATIVE)	PRIOR YEAR REVENUE (\$, ILLUSTRATIVE)	BOARD-AND-TRAIN REVENUE (\$, ILLUSTRATIVE)

7 PRIOR INSURANCE & LOSS HISTORY

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

CURRENT GL CARRIER	ANIMAL BAILEE LIMIT (PER ANIMAL / AGGREGATE)	PROFESSIONAL LIABILITY LIMIT

7-1 Has any carrier declined, cancelled, or non-renewed coverage for this operation in the last 5 years? ☐ Yes ☐ No
IF YES, EXPLAIN

7-2 Does the current GL policy exclude dog bites, specific breeds, or animals in the applicant's care? ☐ Yes ☐ No
IF YES, EXPLAIN

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

7-3 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

8 RISK MANAGEMENT & SAFETY

8-1 Are trainers trained in canine first aid and dog-fight separation? ☐ Yes ☐ No
IF YES, EXPLAIN

8-2 Is the training area securely fenced with double-gated entries to prevent escapes? ☐ Yes ☐ No
IF YES, EXPLAIN

8-3 Are incident reports written for every bite, injury, or escape? ☐ 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