CORY WASHINGTON & CO.

SMARTER RISK. STRONGER BUSINESS.

FOOD & BEVERAGE MANUFACTURING SUPPLEMENTAL

Covers food and beverage manufacturers, processors, co-packers, and commercial kitchens selling wholesale. Breweries, wineries, and distilleries use their own forms; pet food uses CWCO-SUP-PETFOOD. Complete with ACORD 125, 126, and 140. Attach the food safety plan and recall plan.

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

REGULATOR (FDA / USDA-FSIS / STATE) | FDA FACILITY REGISTRATION NO. | GFSI CERTIFICATION (SQF, BRC, FSSC)

2 OPERATIONS

PRODUCT / PRODUCT LINE	TARGET CUSTOMER (CONSUMER / INDUSTRIAL)	APPLICANT'S ROLE (MFR / CONTRACT MFR / PRIVATE LABEL)	ANNUAL SALES ($)

Higher-risk products (check all that apply):

☐ Ready-to-eat meats or poultry ☐ Dairy or soft cheese ☐ Fresh-cut produce ☐ Infant or medical foods ☐ Acidified or low-acid canned foods
☐ Dietary supplements ☐ Raw or unpasteurized products ☐ None of these

2-1 Does the applicant co-pack products for other brands? ☐ Yes ☐ No
IF YES, EXPLAIN

2-2 Does the applicant use a co-packer to make its own products? ☐ Yes ☐ No
IF YES, EXPLAIN

3 EXPOSURE & RISK QUESTIONS — CONTAMINATION, SANITATION & RECALLS

USDA found poor sanitation caused the 2024 Boar's Head listeria outbreak that killed 10 people and sickened 61: product residue, condensation, and cracked floors, with inspectors logging 84 problems in the two years before. The plant recalled more than 7 million pounds and closed.

3-1 Is there a written food safety plan (HACCP or FSMA preventive controls) reviewed by a qualified individual? ☐ Yes ☐ No
IF YES, EXPLAIN

3-2 Is there an environmental monitoring program testing for Listeria (or other pathogens) in production areas? ☐ Yes ☐ No
IF YES, EXPLAIN

3-3 Are positive environmental results investigated with documented corrective action? ☐ Yes ☐ No
IF YES, EXPLAIN

3-4 Are sanitation procedures written, verified each shift, and documented? ☐ Yes ☐ No
IF YES, EXPLAIN

3-5 Are raw and ready-to-eat areas separated, including equipment and traffic between them? ☐ Yes ☐ No
IF YES, EXPLAIN

3-6 Are regulator-cited noncompliances corrected and tracked to closure? ☐ Yes ☐ No
IF YES, EXPLAIN

3-7 Is there a written quality-control and testing procedure for every product? ☐ Yes ☐ No
IF YES, EXPLAIN

3-8 Can products be traced by lot, batch, or serial number to the date made and the customer sold to? ☐ Yes ☐ No
IF YES, EXPLAIN

3-9 Is there a written recall plan to withdraw defective products quickly? ☐ Yes ☐ No
IF YES, EXPLAIN

3-10 Are certificates of insurance with products coverage obtained from suppliers of components? ☐ Yes ☐ No
IF YES, EXPLAIN

3-11 Has the applicant recalled, or considered recalling, any product? ☐ Yes ☐ No
IF YES, EXPLAIN

3-12 Has any product been linked to illness, or has a regulator cited the plant in the last 3 years? ☐ Yes ☐ No
IF YES, EXPLAIN

4 EXPOSURE & RISK QUESTIONS — ALLERGENS, CO-PACKING & PLANT HAZARDS

4-1 Is there a written allergen control program covering scheduling, cleaning, and label checks? ☐ Yes ☐ No
IF YES, EXPLAIN

4-2 Are labels checked against formulas at every changeover? ☐ Yes ☐ No
IF YES, EXPLAIN

4-3 If yes to 2-2, does the co-packer carry products and recall coverage naming the applicant? ☐ Yes ☐ No
IF YES, EXPLAIN

4-4 Are ammonia refrigeration systems (if any) managed under a written process-safety program? ☐ Yes ☐ No
IF YES, EXPLAIN

4-5 Is combustible dust (flour, sugar, powders) controlled with a dust hazard analysis? ☐ Yes ☐ No
IF YES, EXPLAIN

5 PAYROLL & SALES

TOTAL ANNUAL PAYROLL ($)	ANNUAL GROSS SALES ($)	CO-PACK SALES ($)

6 PRIOR INSURANCE & LOSS HISTORY

Attach currently valued loss runs for the last 5 years.

GL / PRODUCTS CARRIER / LIMITS	PRODUCT CONTAMINATION / RECALL LIMIT	UMBRELLA LIMIT

6-1 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

6-2 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

7 RISK MANAGEMENT

7-1 Are mock recalls run at least yearly? ☐ Yes ☐ No
IF YES, EXPLAIN

7-2 Are suppliers approved and verified under a supplier program? ☐ 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