

Covers gunsmiths and firearm repair shops — repairs, trigger and action work, rebarreling, custom builds, refinishing, scope mounting, NFA work, and test firing. Retail gun stores and dealers use CWCO-SUP-GUN. Complete with ACORD 125 and 140. Attach FFL and SOT documentation and a description of security measures.

1

APPLICANT / BUSINESS INFORMATION

LEGAL BUSINESS NAME

DBA

FEIN

YEARS IN BUSINESS

SHOP ADDRESS

CITY / STATE / ZIP

WEBSITE

Entity type:

☐ Sole proprietor

☐ Partnership

☐ LLC

☐ Corporation

☐ Other

PRIMARY CONTACT / TITLE

PHONE

EMAIL

FFL TYPE AND NO. / SOT CLASS

ITAR REGISTRATION (IF ANY)

2

OPERATIONS

SERVICE	% OF REVENUE

Services: cleaning / basic repair; trigger and action work; rebarreling / chambering; custom builds; Cerakote / bluing / refinishing; scope mounting / bore sighting; stock work; NFA / suppressor work; ammunition reloading; firearm sales.

Size:

Firearms in shop at one time (avg.)

Max. value of customer firearms (\$)

Gunsmiths

Other employees

Jobs per year

3

EXPOSURE & RISK QUESTIONS — WORKMANSHIP, TRIGGERS & TEST FIRING

A federal jury awarded \$2.3 million in 2024 over a pistol that fired while being drawn, faulting the trigger design; gunsmiths who alter triggers and safeties take on similar claims.

3-1 Does the shop modify triggers, safeties, or firing mechanisms?

☐ Yes ☐ No

IF YES, EXPLAIN

3-2 Is every firearm function-checked and safety-checked before return?

☐ Yes ☐ No

IF YES, EXPLAIN

3-3 Does the shop rebarrel, rechamber, or headspace firearms?

☐ Yes ☐ No

IF YES, EXPLAIN

3-4 Is test firing done in a bullet trap or on a range the shop controls?

☐ Yes ☐ No

IF YES, EXPLAIN

3-5 Does the shop build complete firearms or sell firearms it has modified?

☐ Yes ☐ No

IF YES, EXPLAIN

3-6 Does the shop reload or sell ammunition?

☐ Yes ☐ No

IF YES, EXPLAIN

3-7 Has a customer claimed injury or damage from a firearm the shop worked on?

☐ Yes ☐ No

IF YES, EXPLAIN

4 EXPOSURE & RISK QUESTIONS — SECURITY, RECORDS & CUSTOMER FIREARMS

ATF data showed about 1,270 theft incidents at licensed firearm businesses in 2017, with more than 9,000 guns stolen or lost.

4-1 Are firearms stored in a locked safe or vault when the shop is closed? ☐ Yes ☐ No
IF YES, EXPLAIN

4-2 Does the shop have a monitored burglar alarm, cameras, and bollards or bars? ☐ Yes ☐ No
IF YES, EXPLAIN

4-3 Is every customer firearm logged in and out in the acquisition and disposition record? ☐ Yes ☐ No
IF YES, EXPLAIN

4-4 Has the shop had a burglary, robbery, or missing firearm in the last 5 years? ☐ Yes ☐ No
IF YES, EXPLAIN

4-5 Has ATF cited, warned, or held a revocation hearing for the shop? ☐ Yes ☐ No
IF YES, EXPLAIN

4-6 Does the shop ship firearms or parts across state lines or internationally? ☐ Yes ☐ No
IF YES, EXPLAIN

4-7 Are solvents, finishes, or ovens used for refinishing in the shop? ☐ Yes ☐ No
IF YES, EXPLAIN

5 PAYROLL, SALES & REVENUE

TOTAL ANNUAL PAYROLL (\$, ILLUSTRATIVE)	NUMBER OF EMPLOYEES	CONTRACT GUNSMITHS
ANNUAL SERVICE REVENUE (\$, ILLUSTRATIVE)	FIREARM / PARTS SALES (\$)	AMMUNITION SALES (\$)

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 customer firearm been damaged, lost, or stolen while in the shop's care? ☐ 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

Are written work orders signed by customers describing all modifications?

☐ Yes ☐ No

IF YES, EXPLAIN

7-2

Is an annual self-audit of ATF records completed?

☐ Yes ☐ No

IF YES, EXPLAIN

7-3

Are firearms unloaded and checked at intake before any work begins?

☐ 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