

Covers historical societies, historic house museums and sites, preservation organizations (including revolving funds and easement holders), local history archives, and heritage tours. Complete with ACORD 125/126/140. Attach the property schedule with year built and historic designation, a collections inventory or appraisal summary, and the events calendar.

1 APPLICANT / ORGANIZATION INFORMATION

LEGAL ORGANIZATION NAME	DBA	FEIN	YEARS OPERATING
MAIN ADDRESS	CITY / STATE / ZIP	WEBSITE	

Entity type:
☐ 501(c)(3) nonprofit ☐ Friends group for a public site ☐ Government-owned site ☐ Other

EXECUTIVE DIRECTOR / CONTACT	PHONE	EMAIL

HISTORIC DESIGNATIONS (NATIONAL REGISTER, LOCAL)	BUILDINGS OWNED OR LEASED

2 OPERATIONS

DESCRIPTION OF THE ORGANIZATION (SITES, COLLECTIONS, PROGRAMS, PRESERVATION ACTIVITIES)

Activities (check all):

- ☐ Historic house museum ☐ Archive / research library ☐ Collections exhibits ☐ Walking or bus tours ☐ Reenactments / living history
☐ Weddings and rentals ☐ Preservation revolving fund ☐ Conservation / facade easements ☐ Restoration of owned buildings
☐ Educational programs for children

Size:

Visitors per year	Oldest building (year built)	Collection items	Collection value (\$)	Volunteers / docents
Events per year				

3 EXPOSURE & RISK QUESTIONS — HISTORIC BUILDINGS & FIRE

An arson fire at Philadelphia's Carpenters' Hall destroyed archival records and caused more than \$1 million in repairs; a 2025 electrical fire at a Pennsylvania historical society destroyed a rear addition and some artifacts.

3-1	Are buildings insured for the cost to restore with historic materials and methods, not just modern replacement?	☐ Yes ☐ No
	IF YES, EXPLAIN	
3-2	Are historic buildings protected by smoke detection monitored by a central station?	☐ Yes ☐ No
	IF YES, EXPLAIN	
3-3	Are any buildings sprinklered, or are fire suppression upgrades planned?	☐ Yes ☐ No
	IF YES, EXPLAIN	
3-4	Has the electrical system in each building been inspected or updated in the last 10 years?	☐ Yes ☐ No
	IF YES, EXPLAIN	
3-5	Are candles, open flames, fireplaces, or period cooking used in programs?	☐ Yes ☐ No
	IF YES, EXPLAIN	
3-6	Is restoration or construction work underway, and are hot-work permits required of contractors?	☐ Yes ☐ No
	IF YES, EXPLAIN	
3-7	Are buildings vacant, seasonal, or left unattended for long periods?	☐ Yes ☐ No
	IF YES, EXPLAIN	

3-8 Do local historic or building codes require costly upgrades if a building is damaged? ☐ Yes ☐ No
IF YES, EXPLAIN

4 EXPOSURE & RISK QUESTIONS — COLLECTIONS, VISITORS & EASEMENTS

4-1 Is there a current collections inventory with photographs, and are high-value items appraised? ☐ Yes ☐ No
IF YES, EXPLAIN

4-2 Are archives and fragile items stored with climate control and off-site digital copies? ☐ Yes ☐ No
IF YES, EXPLAIN

4-3 Does the organization borrow items or lend items to other institutions? ☐ Yes ☐ No
IF YES, EXPLAIN

4-4 Do historic buildings have steep stairs, uneven floors, or low railings, and are visitors guided or warned? ☐ Yes ☐ No
IF YES, EXPLAIN

4-5 Does the organization host weddings, rentals, or events with alcohol? ☐ Yes ☐ No
IF YES, EXPLAIN

4-6 Are children's programs run, and are staff and volunteers working with children background-checked? ☐ Yes ☐ No
IF YES, EXPLAIN

4-7 Does the organization hold preservation easements or covenants it must monitor and enforce? ☐ Yes ☐ No
IF YES, EXPLAIN

4-8 Does the organization buy, restore, and resell historic properties? ☐ Yes ☐ No
IF YES, EXPLAIN

5 PAYROLL, SALES & REVENUE

TOTAL ANNUAL PAYROLL (\$, ILLUSTRATIVE)	NUMBER OF EMPLOYEES	VOLUNTEER HOURS PER YEAR
ADMISSIONS & TOURS (\$, ILLUSTRATIVE)	EVENTS & RENTALS (\$, ILLUSTRATIVE)	GRANTS & DONATIONS (\$, ILLUSTRATIVE)

6 PRIOR INSURANCE & LOSS HISTORY

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

CURRENT PROPERTY CARRIER	BUILDING LIMIT / VALUATION BASIS	FINE ART / COLLECTIONS LIMIT

6-1 Has any carrier declined, cancelled, or non-renewed coverage for this organization in the last 5 years? ☐ Yes ☐ No
IF YES, EXPLAIN

6-2 Has there been a fire, water, theft, or collections loss in the last 10 years? ☐ 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 emergency and collections salvage plan, shared with the local fire department?	☐ Yes ☐ No
IF YES, EXPLAIN		
7-2	Are docents trained on emergency exits, crowd limits, and first aid?	☐ Yes ☐ No
IF YES, EXPLAIN		
7-3	Are buildings inspected at least annually for roof, water, and electrical problems?	☐ 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