

For owners who lease commercial buildings to tenants and do not occupy them (lessor's risk). Complete with CWCO-SUP-CORE, ACORD 125, and CWCO-SUP-PROP for building details. Apartment buildings use CWCO-SUP-APARTMENT. Attach a sample lease.

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
NUMBER OF BUILDINGS	TOTAL LEASABLE SQ. FT.	ANNUAL GROSS RENTS (\$)

2 BUILDINGS & TENANTS

Building types (check all that apply):

☐ Office
 ☐ Retail strip
 ☐ Shopping center
 ☐ Industrial / warehouse
 ☐ Medical office
 ☐ Flex / mixed commercial

TENANT / BUSINESS	TYPE OF BUSINESS	SQ. FT.	LEASE EXPIRES

% OF SPACE VACANT TODAY	LONGEST VACANCY (MONTHS)	PROPERTY MANAGER (IF ANY)

2-1 Are there any residential units? (If so, complete CWCO-SUP-APARTMENT) ☐ Yes ☐ No
 IF YES, EXPLAIN

2-2 Do any tenants operate a restaurant, bar, nightclub, auto repair, manufacturing, or cannabis business? ☐ Yes ☐ No
 IF YES, EXPLAIN

2-3 Does the owner occupy or operate a business in any part of the buildings? ☐ Yes ☐ No
 IF YES, EXPLAIN

2-4 Does the owner provide services to tenants (janitorial, security, snow removal)? ☐ Yes ☐ No
 IF YES, EXPLAIN

3 EXPOSURE & RISK QUESTIONS — VACANCY, TENANT CONTROL & LEASE RISK TRANSFER

U.S. office vacancy reached a record 21% in early 2026 and is expected to rise as leases expire. Vacant space brings vandalism, water, and vacancy-clause exposure, while occupied space depends on tenants who carry insurance, maintain their spaces, and indemnify the owner as their leases require.

3-1	Is there a written lease with every tenant?	☐ Yes ☐ No
	IF NO, EXPLAIN	
3-2	Do leases require tenants to carry general liability insurance at stated minimum limits?	☐ Yes ☐ No
	IF NO, EXPLAIN	
MINIMUM TENANT GL LIMIT REQUIRED (\$)		LEASE TYPE (GROSS / MODIFIED / TRIPLE-NET)
3-3	Do leases require tenants to name the owner as additional insured on a primary and non-contributory basis?	☐ Yes ☐ No
	IF NO, EXPLAIN	
3-4	Are tenant certificates of insurance collected and tracked to renewal every year?	☐ Yes ☐ No
	IF NO, EXPLAIN	
3-5	Do leases require tenants to indemnify the owner for claims arising from their spaces?	☐ Yes ☐ No
	IF NO, EXPLAIN	
3-6	Do leases make tenants responsible for maintaining their own spaces?	☐ Yes ☐ No
	IF NO, EXPLAIN	
3-7	Has any building or suite been vacant for more than 60 days?	☐ Yes ☐ No
	IF YES, EXPLAIN	
3-8	Is vacant space inspected at least weekly?	☐ Yes ☐ No
	IF NO, EXPLAIN	
3-9	In vacant space, are utilities managed to prevent frozen pipes and water damage?	☐ Yes ☐ No
	IF NO, EXPLAIN	
3-10	Is any tenant currently in default, being evicted, or behind on rent?	☐ Yes ☐ No
	IF YES, EXPLAIN	

4 PREMISES & COMMON AREAS

Answer for areas the owner controls: parking, sidewalks, roofs, and common areas.

WHO MAINTAINS PARKING, ROOF & COMMON AREAS (OWNER / TENANTS / MANAGER)

4-1	Are parking lots and sidewalks inspected for trip hazards on a schedule?	☐ Yes ☐ No
	IF NO, EXPLAIN	
4-2	Are parking lots and walkways lit at night?	☐ Yes ☐ No
	IF NO, EXPLAIN	
4-3	Is there a written snow and ice removal contract?	☐ Yes ☐ No
	IF NO, EXPLAIN	
4-4	Does the snow contractor carry insurance naming the owner as additional insured?	☐ Yes ☐ No
	IF NO, EXPLAIN	
4-5	Are elevators, fire alarms, and sprinklers inspected as required?	☐ Yes ☐ No
	IF NO, EXPLAIN	
4-6	Are inspection records kept on file?	☐ Yes ☐ No
	IF NO, EXPLAIN	
4-7	Has every roof been inspected in the past 3 years?	☐ Yes ☐ No
	IF NO, EXPLAIN	

4-8 Have there been assaults, thefts, or other crimes in parking or common areas in the past 3 years?

☐ Yes ☐ No

IF YES, EXPLAIN

5 COVERAGE & LOSS HISTORY

Attach currently valued loss runs for the last 5 years.

GL LIMITS (OCCURRENCE / AGGREGATE)

UMBRELLA LIMIT (\$)

CURRENT CARRIER / PREMIUM

5-1 Has there been a liability claim involving a tenant's customer or a visitor in the past 5 years?

☐ Yes ☐ No

IF YES, EXPLAIN

5-2 Has coverage been declined, cancelled, or non-renewed in the past 3 years?

☐ Yes ☐ No

IF YES, EXPLAIN

DATE	BUILDING	DESCRIPTION	PAID / RESERVED (\$)

6 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, may be committing a fraudulent insurance act, which is a crime and may subject such person to criminal and civil penalties. State-specific fraud warnings appear on the insurer's application.

APPLICANT / AUTHORIZED SIGNATURE (TYPE FULL NAME)

TITLE

DATE

PRODUCER — CORY WASHINGTON & CO. LLC

PRODUCER SIGNATURE (TYPE FULL NAME)

DATE