

Covers permanent makeup (PMU) and microblading artists and studios, including brows, eyeliner, lips, areola and scar camouflage, scalp micropigmentation, and PMU removal — whether a standalone studio, inside a salon or med spa, or mobile. Traditional tattooing and piercing should use CWCO-SUP-TATTOO. Complete with ACORD 125/126. Attach the consent and consultation form, aftercare instructions, and each artist's license and training certificates.

1 APPLICANT / BUSINESS INFORMATION

LEGAL BUSINESS NAME	DBA / STUDIO NAME	FEIN	YEARS IN BUSINESS
STUDIO ADDRESS	CITY / STATE / ZIP	WEBSITE / SOCIAL MEDIA	

Entity type:

☐ Sole proprietor ☐ Partnership ☐ LLC ☐ Corporation

PRIMARY CONTACT / TITLE	PHONE	EMAIL

BODY ART / PMU ESTABLISHMENT LICENSE NO.	LICENSING AGENCY (HEALTH DEPT. / BOARD)

Where services are performed (check all that apply):

☐ Standalone PMU studio ☐ Inside a salon ☐ Inside a med spa ☐ Inside a physician's office ☐ Booth / suite rental
☐ Mobile / client homes / events

2 OPERATIONS

DESCRIPTION OF OPERATIONS (SERVICES, TYPICAL CLIENTS, NUMBER OF ARTISTS, BOOKING MODEL)

SERVICE	% OF ANNUAL REVENUE	PROCEDURES / MONTH

Services: microblading; powder / ombre brows; eyeliner; lip blush / lip liner; areola restoration; scar / stretch-mark camouflage; scalp micropigmentation; PMU removal (saline or laser); touch-ups / corrections of others' work.

Staffing:

W-2 artists Booth renters / 1099 artists Apprentices Locations

2-1 Does the applicant teach PMU or microblading classes, including students working on live models? ☐ Yes ☐ No
 IF YES, EXPLAIN

2-2 Does the applicant sell pigments, aftercare products, or training kits? ☐ Yes ☐ No
 IF YES, EXPLAIN

2-3 Does the applicant perform laser tattoo or PMU removal? ☐ Yes ☐ No
 IF YES, EXPLAIN

3 EXPOSURE & RISK QUESTIONS — INFECTION CONTROL & PIGMENTS

OSHA's Bloodborne Pathogens Standard applies to permanent cosmetics. A 2024 FDA study found bacteria in 35% of sealed tattoo and permanent makeup inks, with eye-area work flagged as higher risk.

- 3-1 Does the applicant maintain a written Bloodborne Pathogens Exposure Control Plan with annual training for every artist? ☐ Yes ☐ No
IF YES, EXPLAIN
- 3-2 Are all needles, blades, and cartridges single-use, received in sealed sterile packs, and disposed of in sharps containers? ☐ Yes ☐ No
IF YES, EXPLAIN
- 3-3 Are pigments bought only from suppliers that provide sterility or microbial testing documentation for each lot? ☐ Yes ☐ No
IF YES, EXPLAIN
- 3-4 Are pigment lot numbers and expiration dates recorded in each client's record, with single-use pigment cups and nothing returned to the bottle? ☐ Yes ☐ No
IF YES, EXPLAIN
- 3-5 If any reusable instruments are used, are they autoclaved with documented spore testing? ☐ Yes ☐ No
IF YES, EXPLAIN
- 3-6 In the past 5 years, has any client reported an infection, allergic reaction, or granuloma after a procedure? ☐ Yes ☐ No
IF YES, EXPLAIN

4 EXPOSURE & RISK QUESTIONS — CONSULTATION, CONSENT & RESULTS

Because PMU is on the face and meant to last, dissatisfaction with shape, color, symmetry, and fading drives many claims — separate from infection or injury.

- 4-1 Does every client complete a written health screening for contraindications (pregnancy, blood thinners, isotretinoin, keloids, diabetes, active skin conditions) before the procedure? ☐ Yes ☐ No
IF YES, EXPLAIN
- 4-2 Is a patch test offered or required before first-time pigment use? ☐ Yes ☐ No
IF YES, EXPLAIN
- 4-3 Does the client approve the drawn shape and color in writing (or on photo) before work begins? ☐ Yes ☐ No
IF YES, EXPLAIN
- 4-4 Does the signed consent disclose fading, color change over time, possible need for touch-ups, removal difficulty, and MRI considerations? ☐ Yes ☐ No
IF YES, EXPLAIN
- 4-5 Are before and after photos taken and kept for every client? ☐ Yes ☐ No
IF YES, EXPLAIN
- 4-6 For eyeliner, are protective measures used to keep pigment and anesthetic out of the eye? ☐ Yes ☐ No
IF YES, EXPLAIN
- 4-7 For areola restoration or scar camouflage, is physician clearance obtained for post-surgical clients? ☐ Yes ☐ No
IF YES, EXPLAIN
- 4-8 Are topical anesthetics used only as products legally available to the artist, applied per label and state rules? ☐ Yes ☐ No
IF YES, EXPLAIN
- 4-9 In the past 5 years, has any client demanded a refund, correction at another studio, or compensation over the result? ☐ Yes ☐ No
IF YES, EXPLAIN
- 4-10 Are services refused to minors? ☐ Yes ☐ No
IF YES, EXPLAIN

5 EXPOSURE & RISK QUESTIONS — LICENSING & TRAINING

Licensing for microblading varies sharply by state. New Jersey, for example, treats microblading as micropigmentation and requires a 40-hour course, certification, an apprenticeship, and a body art establishment license.

- 5-1 Is every artist individually licensed or registered as required by the state and local health department? ☐ Yes ☐ No
IF YES, EXPLAIN

5-2 Has every artist completed formal PMU training (hours, provider) and supervised procedures before working independently? ☐ Yes ☐ No
IF YES, EXPLAIN

5-3 Has the studio passed its most recent health department inspection? ☐ Yes ☐ No
IF YES, EXPLAIN

5-4 Do booth renters or 1099 artists carry their own professional liability insurance naming the applicant as additional insured? ☐ Yes ☐ No
IF YES, EXPLAIN

6 PAYROLL, SALES & REVENUE

TOTAL ANNUAL PAYROLL (\$, ILLUSTRATIVE)	NUMBER OF EMPLOYEES	ANNUAL BOOTH RENT RECEIVED (\$, ILLUSTRATIVE)
PROJECTED ANNUAL GROSS REVENUE (\$, ILLUSTRATIVE)	PRIOR YEAR REVENUE (\$, ILLUSTRATIVE)	AVERAGE PROCEDURE PRICE (\$, ILLUSTRATIVE)

7 PRIOR INSURANCE & LOSS HISTORY

Attach currently-valued loss runs for the last 5 years for professional and general liability.

CURRENT PROFESSIONAL LIABILITY CARRIER	CURRENT LIMITS	RETROACTIVE DATE (IF CLAIMS-MADE)

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 Is PMU currently insured under a salon, spa, or med spa policy that excludes tattooing or micropigmentation? ☐ 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 written aftercare instructions given to every client and acknowledged in writing? ☐ Yes ☐ No
IF YES, EXPLAIN

8-2 Are client records (screening, consent, lot numbers, photos) kept for at least the statute of limitations? ☐ Yes ☐ No
IF YES, EXPLAIN

8-3 Is there a written refund and correction policy disclosed before booking? ☐ Yes ☐ No
IF YES, EXPLAIN

8-4 Are online reviews and social media complaints monitored and escalated as possible claims? ☐ Yes ☐ No
IF YES, EXPLAIN

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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