RESTORATION & REMEDIATION CONTRACTOR SUPPLEMENTAL

Covers water, fire, and storm damage restoration, mold remediation, biohazard and trauma cleanup, and contents restoration. Complete with ACORD 125, 126, and 130.

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

IICRC FIRM CERTIFICATION (Y / N)	MOLD / CONTRACTOR LICENSE NO(S).	FRANCHISE BRAND (IF ANY)

2 OPERATIONS

PERIOD	DIRECT PAYROLL ($)	EMPLOYEES	SUBCONTRACTOR COSTS ($)	GROSS RECEIPTS ($)

Periods: next 12 months (estimated); prior 12 months; second prior year.

TYPE OF WORK	% OF RECEIPTS

Types: water mitigation and drying; mold remediation; fire and smoke restoration; storm and roof tarping; contents pack-out and cleaning; biohazard / trauma cleanup; reconstruction; other.

2-1 Does the applicant perform mold remediation? ☐ Yes ☐ No

IF YES, EXPLAIN

2-2 Does the applicant pack out and store customers' contents? ☐ Yes ☐ No

IF YES, EXPLAIN

2-3 Does the applicant work in Florida or accept assignments of insurance benefits anywhere? ☐ Yes ☐ No

IF YES, EXPLAIN

2-4 Does the applicant travel to work catastrophe or storm events out of state? ☐ Yes ☐ No

IF YES, EXPLAIN

3 EXPOSURE & RISK QUESTIONS — DRYING, MOLD & BILLING PRACTICES

Restoration claims usually allege moisture or mold was left behind, measured against IICRC S500 and S520 standards. Since Florida banned assignments of benefits on policies issued from 2023, contractors bill owners directly — and "we bill your insurance" promises become disputes when insurers underpay.

3-1 Is drying documented with daily moisture readings until readings meet dry standard? ☐ Yes ☐ No
IF YES, EXPLAIN

3-2 Is water mitigation performed to IICRC S500? ☐ Yes ☐ No
IF YES, EXPLAIN

3-3 If yes to 2-1, is mold remediation performed to IICRC S520 with containment and negative air? ☐ Yes ☐ No
IF YES, EXPLAIN

3-4 If yes to 2-1, is post-remediation verification done by an independent assessor? ☐ Yes ☐ No
IF YES, EXPLAIN

3-5 Do contracts state that the owner is responsible for any balance the insurer doesn't pay? ☐ Yes ☐ No
IF YES, EXPLAIN

3-6 If yes to 2-3, are assignments accepted only under pre-2023 policies and in compliance with state law? ☐ Yes ☐ No
IF YES, EXPLAIN

3-7 Are estimates written line-by-line in industry-standard estimating software? ☐ Yes ☐ No
IF YES, EXPLAIN

3-8 Are written estimates given to owners before work beyond emergency mitigation? ☐ Yes ☐ No
IF YES, EXPLAIN

3-9 Has the applicant had a mold, incomplete-drying, or billing-practices claim in the last 5 years? ☐ Yes ☐ No
IF YES, EXPLAIN

4 EXPOSURE & RISK QUESTIONS — CONTENTS, HAZARDOUS MATERIALS & STORM WORK

4-1 If yes to 2-2, are contents inventoried with photos at pack-out? ☐ Yes ☐ No
IF YES, EXPLAIN

4-2 If yes to 2-2, are contents stored in a secured, climate-controlled facility? ☐ Yes ☐ No
IF YES, EXPLAIN

4-3 Is asbestos and lead testing done before demolition in older buildings? ☐ Yes ☐ No
IF YES, EXPLAIN

4-4 Are biohazard technicians trained under OSHA bloodborne pathogens rules with waste disposed of legally? ☐ Yes ☐ No
IF YES, EXPLAIN

4-5 If yes to 2-4, are required licenses obtained in each state before storm work begins? ☐ Yes ☐ No
IF YES, EXPLAIN

4-6 Are certificates of insurance collected from every subcontractor before work begins? ☐ Yes ☐ No
IF YES, EXPLAIN

4-7 Is the applicant named as additional insured on subcontractors' policies, on a primary and non-contributory basis? ☐ Yes ☐ No
IF YES, EXPLAIN

4-8 Does every subcontractor sign a written contract with a hold-harmless clause in the applicant's favor? ☐ Yes ☐ No
IF YES, EXPLAIN

4-9 Are subcontractors required to carry workers' compensation, with proof verified? ☐ Yes ☐ No
IF YES, EXPLAIN

4-10 Are subcontractors' insurance limits at least equal to the applicant's? ☐ Yes ☐ No
IF YES, EXPLAIN

5 PAYROLL & RECEIPTS SUMMARY

TOTAL ANNUAL PAYROLL ($)	MITIGATION / REMEDIATION RECEIPTS ($)	RECONSTRUCTION RECEIPTS ($)

6 PRIOR INSURANCE & LOSS HISTORY

Attach currently valued loss runs for the last 5 years.

GL CARRIER / LIMITS	CONTRACTORS POLLUTION (INCL. MOLD) (Y / N)	PROFESSIONAL / E&O (Y / N)

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 technicians IICRC-certified in the services they perform? ☐ Yes ☐ No

IF YES, EXPLAIN

7-2 Are job files (photos, moisture maps, readings) kept for at least the statute of limitations? ☐ 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