SEASONAL / HOLIDAY STORE SUPPLEMENTAL

For seasonal and pop-up holiday stores, including Halloween costume and decor stores and Christmas and holiday shops in temporary leases. Haunted attractions use CWCO-SUP-HAUNT. Complete with ACORD 125, 126, and 140. Attach a floor plan or site plan, the lease, and five years of loss runs.

1 APPLICANT / BUSINESS INFORMATION

LEGAL BUSINESS NAME | DBA / STORE NAME | FEIN | YEARS IN BUSINESS

STORE ADDRESS | CITY / STATE / ZIP | WEBSITE

Entity type:

☐ Sole proprietor ☐ Partnership ☐ LLC ☐ Corporation ☐ Franchise

PRIMARY CONTACT / TITLE | PHONE | EMAIL

NUMBER OF LOCATIONS | BUILDING OWNED OR LEASED | HOURS OF OPERATION

2 OPERATIONS

Products and services (check all that apply):

☐ Halloween costumes ☐ Masks & makeup ☐ Animatronic props ☐ Christmas trees & lights ☐ Indoor / outdoor decor

☐ Inflatable yard decor ☐ Party supplies ☐ Candy / novelties

SEASON OPEN / CLOSE DATES | PEAK SEASONAL HEADCOUNT | LEASE TERM (MONTHS)

SALES AREA (SQ. FT.) | ONLINE / PHONE SALES (%) | PRODUCTS IMPORTED DIRECTLY (%)

2-1 Does the store sell products under its own brand or private label? ☐ Yes ☐ No
IF YES, EXPLAIN

2-2 Does the store import any products directly from a foreign manufacturer? ☐ Yes ☐ No
IF YES, EXPLAIN

2-3 Does the store deliver or install products at customers' locations? ☐ Yes ☐ No
IF YES, EXPLAIN

3 EXPOSURE & RISK QUESTIONS — SHORT-TERM LEASE & VACANT BUILDING

Spirit Halloween typically signs three-month leases in vacant big-box spaces, often with landlord kick-out clauses.

3-1 Is the lease term under 6 months? ☐ Yes ☐ No
IF YES, EXPLAIN

3-2 Was the space vacant before this lease? ☐ Yes ☐ No
IF YES, EXPLAIN

3-3 Is the building's sprinkler system confirmed in service? ☐ Yes ☐ No
IF NO, EXPLAIN

3-4 Was a fire inspection passed before opening? ☐ Yes ☐ No
IF NO, EXPLAIN

3-5 Does the lease require the tenant to insure the building? ☐ Yes ☐ No
IF YES, EXPLAIN

3-6 Does the lease include a waiver of subrogation? ☐ Yes ☐ No
IF NO, EXPLAIN

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3-7 Is there a walk-through or haunted display area in the store? ☐ Yes ☐ No
IF YES, EXPLAIN

3-8 Are fog or haze machines operated in the store? ☐ Yes ☐ No
IF YES, EXPLAIN

4 EXPOSURE & RISK QUESTIONS — ANIMATRONICS, DECOR & TEMPORARY STAFF

Spirit Halloween recalled 48-inch black lights after seven reports of bulbs popping, smoking, or catching fire.

4-1 Are animatronic displays powered from permanent outlets rather than extension cords? ☐ Yes ☐ No
IF NO, EXPLAIN

4-2 Are all electrical decor items UL-listed? ☐ Yes ☐ No
IF NO, EXPLAIN

4-3 Do costume vendors certify flammability compliance? ☐ Yes ☐ No
IF NO, EXPLAIN

4-4 Do decorative materials meet NFPA 701 flame resistance? ☐ Yes ☐ No
IF NO, EXPLAIN

4-5 Are display animatronics guarded from customer contact? ☐ Yes ☐ No
IF NO, EXPLAIN

4-6 Do all seasonal hires get safety training before their first shift? ☐ Yes ☐ No
IF NO, EXPLAIN

4-7 Are temporary workers supplied by a staffing agency? ☐ Yes ☐ No
IF YES, EXPLAIN

4-8 Will peak seasonal headcount exceed 20 employees? ☐ Yes ☐ No
IF YES, EXPLAIN

5 PROPERTY, INVENTORY & CRIME

CONSTRUCTION / YEAR BUILT	BUILDING VALUE ($, IF OWNED)	IMPROVEMENTS & BETTERMENTS ($)

AVERAGE INVENTORY ($)	PEAK SEASON INVENTORY ($)	MOST VALUABLE SINGLE ITEM ($)

Protection (check all that apply):

☐ Central station burglar alarm ☐ Central station fire alarm ☐ Full sprinkler system ☐ Security cameras ☐ Security gates / shutters
☐ Safe or vault

5-1 Is cash kept in a locked safe and deposited at least daily? ☐ Yes ☐ No
IF NO, EXPLAIN

5-2 Has the store had a burglary, robbery, or theft loss in the past 5 years? ☐ Yes ☐ No
IF YES, EXPLAIN

5-3 Is refrigerated or temperature-sensitive stock kept on site? ☐ Yes ☐ No
IF YES, EXPLAIN

6 PAYROLL, SALES & REVENUE

PROJECTED ANNUAL GROSS SALES ($)	PRIOR YEAR GROSS SALES ($)	TOTAL ANNUAL PAYROLL ($)

FULL-TIME EMPLOYEES	PART-TIME / SEASONAL EMPLOYEES	DELIVERY / INSTALLATION PAYROLL ($)

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7 PRIOR INSURANCE & LOSS HISTORY

CURRENT PROPERTY / GL CARRIER	CURRENT GL LIMITS	EXPIRATION DATE

DATE OF LOSS	DESCRIPTION	TOTAL INCURRED ($)	OPEN / CLOSED

7-1 Has a claim involved damage to a leased building? ☐ Yes ☐ No
IF YES, EXPLAIN

7-2 Has a customer made an injury claim against the store in the past 5 years? ☐ Yes ☐ No
IF YES, EXPLAIN

7-3 Has a product the store sold been recalled or caused a claim? ☐ Yes ☐ No
IF YES, EXPLAIN

7-4 Has any coverage been declined, cancelled, or non-renewed? ☐ Yes ☐ No
IF YES, EXPLAIN

7-5 Is the applicant aware of any incident or circumstance that could give rise to a claim? ☐ Yes ☐ No
IF YES, EXPLAIN

8 RISK MANAGEMENT & SAFETY

8-1 Are floors, aisles, and entrances inspected on a written schedule with logs kept? ☐ Yes ☐ No
IF NO, EXPLAIN

8-2 Do vendors and suppliers provide certificates of insurance naming the store? ☐ Yes ☐ No
IF NO, EXPLAIN

8-3 Are recall notices checked and recalled products pulled from sale? ☐ Yes ☐ No
IF NO, EXPLAIN

8-4 Are aisles kept at least 44 inches wide during peak season? ☐ Yes ☐ No
IF NO, EXPLAIN

8-5 Is overnight inventory stored away from exits? ☐ Yes ☐ No
IF NO, EXPLAIN

9 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