

Covers zoos, aquariums, wildlife sanctuaries and rescues, nature and raptor centers, petting zoos, and animal encounter attractions. Botanical gardens use CWCO-SUP-BOTANIC. Complete with ACORD 125/126/140. Attach the animal inventory by species, USDA and state permits, accreditation letters, the dangerous animal and escape response plans, and the events calendar.

1 APPLICANT / ORGANIZATION INFORMATION

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

Entity type:
☐ 501(c)(3) nonprofit ☐ Municipal / government ☐ For-profit ☐ Zoological society operating city-owned zoo ☐ Other

DIRECTOR / CONTACT	PHONE	EMAIL

USDA LICENSE / STATE WILDLIFE PERMITS	ACCREDITATION (AZA, ZAA, GFAS, NONE)

2 OPERATIONS

DESCRIPTION OF THE FACILITY (ANIMALS, EXHIBITS, VISITOR EXPERIENCES, CONSERVATION AND RESCUE WORK)

ANIMAL GROUP	NUMBER OF ANIMALS	DANGEROUS SPECIES? (Y/N)

Groups: big cats and bears; great apes and primates; elephants and rhinos; venomous reptiles; crocodilians; marine mammals; sharks and fish; birds and raptors; hoofstock; domestic / petting animals.

Size and volume:

Annual visitors	Acres	Aquarium water volume (gallons)	Events per year	Animal keepers
Volunteers				

3 EXPOSURE & RISK QUESTIONS — ANIMALS, ESCAPES & KEEPER SAFETY

OSHA cited a Florida zoo after a rhinoceros struck a keeper with its horn during a feeding session; the same zoo had a lion get through an open door toward an employee and an elephant leave its enclosure the year before.

3-1 Are dangerous animals managed in protected contact only, with no keeper in the same space?	☐ Yes ☐ No
IF YES, EXPLAIN	
3-2 Is there a two-person or lock-check rule for opening shift doors and dangerous-animal enclosures?	☐ Yes ☐ No
IF YES, EXPLAIN	
3-3 Is there a written escape plan with trained response teams, drills, and firearms or darting capability?	☐ Yes ☐ No
IF YES, EXPLAIN	
3-4 Has any animal escaped its primary enclosure or injured a person in the last 5 years?	☐ Yes ☐ No
IF YES, EXPLAIN	
3-5 Are perimeter fences and public barriers inspected and rated for the species they contain?	☐ Yes ☐ No
IF YES, EXPLAIN	

3-6 Is antivenom stocked and is there a bite protocol for venomous species? ☐ Yes ☐ No
IF YES, EXPLAIN

3-7 Are animals screened for diseases that can pass to people (zoonoses), and are hand-washing stations provided at contact areas? ☐ Yes ☐ No
IF YES, EXPLAIN

3-8 Has USDA or a state agency cited the facility in the last 3 years? ☐ Yes ☐ No
IF YES, EXPLAIN

4 EXPOSURE & RISK QUESTIONS — VISITORS, ENCOUNTERS & LIFE SUPPORT

USDA cited an aquarium after a lemur in an animal encounter cut a visitor's face, its third critical citation in under a year.

4-1 Do visitors touch, feed, or interact with animals (encounters, petting zoo, touch pools, feedings)? ☐ Yes ☐ No
IF YES, EXPLAIN

4-2 Are encounters supervised by trained staff, with signed waivers and age limits? ☐ Yes ☐ No
IF YES, EXPLAIN

4-3 Does the facility offer rides (train, carousel, camel, pony) or zip lines and ropes courses? ☐ Yes ☐ No
IF YES, EXPLAIN

4-4 Do animals travel off site for outreach, schools, or events? ☐ Yes ☐ No
IF YES, EXPLAIN

4-5 Are aquarium life-support systems (pumps, filtration, temperature) backed up by generators and alarms monitored 24/7? ☐ Yes ☐ No
IF YES, EXPLAIN

4-6 Does the facility host after-hours events, rentals, or serve alcohol? ☐ Yes ☐ No
IF YES, EXPLAIN

4-7 Are walkways, wet areas, and viewing platforms inspected daily for slip and fall hazards? ☐ Yes ☐ No
IF YES, EXPLAIN

5 PAYROLL, SALES & REVENUE

TOTAL ANNUAL PAYROLL (\$, ILLUSTRATIVE)	NUMBER OF EMPLOYEES	KEEPERS & ANIMAL CARE STAFF
ADMISSIONS REVENUE (\$, ILLUSTRATIVE)	EVENTS, FOOD & RETAIL (\$, ILLUSTRATIVE)	GRANTS, DONATIONS & GOVERNMENT (\$, ILLUSTRATIVE)

6 PRIOR INSURANCE & LOSS HISTORY

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

CURRENT GL / PROPERTY CARRIER

ANIMAL MORTALITY / LIVE ANIMAL LIMIT

EXPIRATION DATE

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

IF YES, EXPLAIN

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6-2 Has a visitor or employee been bitten, scratched, or seriously injured in the last 5 years? ☐ Yes ☐ No

IF YES, EXPLAIN

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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

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7 RISK MANAGEMENT & SAFETY

7-1 Is there a safety committee that reviews every animal incident and near miss? ☐ Yes ☐ No

IF YES, EXPLAIN

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7-2 Is there a written emergency plan for hurricanes, fires, and power loss covering animal relocation? ☐ Yes ☐ No

IF YES, EXPLAIN

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7-3 Are keepers trained on species-specific safety protocols before working alone? ☐ Yes ☐ No

IF YES, EXPLAIN

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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

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PRODUCER — CORY WASHINGTON & CO. LLC

PRODUCER SIGNATURE (TYPE FULL NAME)

DATE

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