



BEAUTY SHOP and BARBER SHOP - SUPPLEMENTAL APPLICATION

ACORD Application also required - Check all applicable check boxes below

General Agent:

Date:

Insured:

Insured Mailing Address:

Insured's Web Address:

Insured Contact Name:

Phone Number:

PROHIBITED (check all that apply to your operations)

- Acupuncture
- Beds or booths, but those used for tanning are acceptable
- Blending, manufacturing, mixing or repackaging products sold for use on or off premises
- Body piercing
- Body wraps IF non-organic products used
- Brazilian 'blowout', a/k/a Brazilian keratin hair straightening treatments
- Chemical peels
- Collagen injections
- Ear candling
- Electrolysis
- Estheticians
- Laser treatments
- Permanent makeup applications
- Tattooing

YEARS IN BUSINESS / EXPERIENCE

_____ Years in business as the 'Named Insured' indicated on this application

_____ Years' experience in the operations indicated on this application - Attach resumes if available

- Has applicant had an insurance policy cancelled or non-renewed in past 3 years? If yes, explain.
'Missouri Applicants - Do not answer this question)

- Applicant in receivership
- Bankruptcy (Chapter 7, 11 or 13) has been filed in past 5 years

LOSS HISTORY

- Three years of loss history information is on ACORD application or attached to this application

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OPERATIONS / EXPOSURES

- Barber Shop Beauty Shop Ear Piercing / Facials / False lashes / Makeovers Nails
- Spray tanning in booth(s)
- Spray tanning performed manually by employee(s)
Number of Spray Tanning Booths (if any): _____
- Spray tanning performed off premises
- Tanning Beds
Number of Tanning Beds: _____
- Waxing Other (Describe): _____

TANNING BEDS (check if applicable)

- Attendant is on duty at all times
- Goggles supplied to each customer
- Signs posted advising tanning is prohibited if on medications or pregnant
- Timers are controlled by attendant
- Units disinfected after each use by employees
- Waivers (signed) are permanently maintained on file, as well as time and usage sheets
- Waivers signed by each customer or parent/guardian if customer is under legal age

PROFESSIONAL LIABILITY

- Professional liability coverage is provided at no additional charge, but only if exposures are limited to barber and beauty type exposures only.

SUBCONTRACTORS / INDEPENDENT CONTRACTORS

- Uninsured subcontractors are not acceptable.
- Risk Transfer – Subcontractors:
 - Additional Insured – Status granted to you on the subcontractor's policy
 - Certificates of Insurance - Always obtained from a subcontractor prior to any work being done for you.
 - Limits of Liability - Subcontractors are required to carry limits equal or above your own
- **Masseuses:**
 - Exposures are only acceptable if the following apply (check all that are applicable):
 - No premium charge required but form U008R – Contractors Coverage Limitations becomes a mandatory form
 - The following are mandatory (check if applicable):
 - Masseur is an independent contractor, employees who are masseuses are prohibited.
 - Certificate of insurance is maintained on file by insured and updated annually

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EMPLOYEES / INDEPENDENT CONTRACTORS

	# of Employees	# of Independent Contractors
Barbers or Beauticians – Full Time		
Barbers or Beauticians - Part time (15 hours or less per week)		
Operators performing ear piercings, makeovers, facials, false eyelashes		
Manicurists		
Masseuses	Prohibited	
Waxing		

RECEIPTS

All Operations including Spa Services and Waxing	\$
Spa Services Only	\$
Tanning Beds	\$
Waxing	\$

COVERAGE OPTIONS - LIABILITY (check if you would like a quote on any of the following)

- Employee Benefit Liability – U058
- Employment Practices Liability Insurance – U817 (Not available in AR, LA, MT, NM, NY, VT)
- High Limits General Liability
- Identity Recovery – i.e. Identity Theft – U651
- Medical Expense Limit of \$10,000 rather than \$5,000
- Stop Gap Liability – U066

COVERAGE OPTIONS - PROPERTY (check if you would like a quote on any of the following)

- Building Ordinance or Law (Increased Cost of Construction) – U750
- Equipment Breakdown – U522 & U523
Property Coverage Enhancement: Bronze – U777C Silver – U777B or Gold – U777A
- Signs (Outdoor) – CP1440
- Water Back Up and Sump Overflow – U548

GENERAL FRAUD STATEMENT (Not applicable in all states.)

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim 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, and may be subject to a civil penalty or fine.

The undersigned is an authorized representative of the applicant and certifies that reasonable inquiry has been made to questions on this application. He/She certifies:

- The answers are true, correct and complete to the best of his/her knowledge.*
- They agree to the Privacy and Fraud provisions found in the ACORD-125 (Commercial Insurance Application) and understand those provisions also apply to this supplemental application.*

SIGN AND DATE

PRODUCER'S SIGNATURE	DATE
APPLICANT'S PRINTED NAME	DATE
APPLICANT'S SIGNATURE	DATE