

**Required Submission Information:**

- List of hemp products sold
- 5 years currently valued GL & Liquor loss runs
- Copy of Employee Training Program(s) and/or Service Policy
- Photos or copy of menu for THC products
- Photos or copy of any warning signs posted, if applicable
- Copy of Liquor Liability quote or policy, if alcohol is sold

**1** Applicant Name: \_\_\_\_\_

DBA: \_\_\_\_\_

**2** Description of Operations: \_\_\_\_\_

**3** Website: \_\_\_\_\_

**4** Mailing Address: \_\_\_\_\_

**5** Location Address: \_\_\_\_\_

*For multiple locations, provide Schedule of Locations with submission*

**6** Current Retroactive Date: \_\_\_\_\_

**7** Limits Requested: \_\_\_\_\_

<b>GL &amp; Product Liability</b>
<b>Impairment Liability</b>

**8** Do you sell, purchase, manufacture, distribute or serve any cannabis products  Yes  No other than hemp\*?

**\*Cannabis products other than hemp as defined by federal and state law are ineligible for coverage\***

**9** Estimated Percentage of On-Premises Sales derived from products with THC per serving of:

3 mg or less	3.1 mg – 5 mg	5.1 mg – 10 mg	Greater than 10 mg
_____ %	_____ %	_____ %	_____ %

**10** Gross Revenues by Category

	<b>Hemp Products</b>	<b>Food &amp; Non-Alc</b>	<b>Alcohol</b>
Estimated - Next 12 Months	\$ _____	\$ _____	\$ _____

**11** Do you sell any products under your own brands or labels?  Yes  No

*If yes, please complete CannaBev Full application instead*

**12** Do you offer samples of THC products?  Yes  No

**13** For events and venues not limited to 21+ customers, are IDs checked prior to offering samples?  Yes  No

**14** What is the maximum serving size of sample offered? \_\_\_\_\_

## Consumption at Your Premises

n/a

15 Do you allow onsite consumption of hemp products at your business?  Yes  No

16 Are signs posted stating that customers must be 21+ to consume hemp products?  Yes  No

17 Are signs posted stating that customers should not drive after consuming THC  Yes  No

18 Do security cameras cover the entire premises including all rooms, entrances, exits, & parking lots?  Yes  No

19 How long are video recordings stored? \_\_\_\_\_

## On-Premise Consumption - Training & Service

20 Do you allow employees to consume hemp, cannabis or alcoholic products while working?  Yes  No

21 Service staff are: (check all that apply)

Employees  Independent Contractors

Other - describe: \_\_\_\_\_

22 Are all servers trained/certified in a formal alcohol training course?  Yes  No  n/a

a What course? \_\_\_\_\_

23 Are all servers trained/certified in a formal THC service training course?  Yes  No

a What course? \_\_\_\_\_

24 Describe any other THC or alcohol service training: \_\_\_\_\_

25 Do you check IDs at the door?  Yes  No

26 Do you check IDs at point of sale?  Yes  No

27 Do you utilize ID verification software?  Yes  No

28 Do you prohibit the sale of alcohol or hemp products to visibly intoxicated customers?  Yes  No

29 Are customers permitted to consume both THC and alcohol at the same time?  Yes  No

30 Do you have processes in place to prevent cross-consumption of alcohol and THC?  Yes  No

31 Do you follow guidelines for the maximum amount of THC a customer may be served during a single visit or over designated time periods?  Yes  No

a Describe: \_\_\_\_\_

32 Do you maintain an Incident log?  Yes  No

a How long are records maintained? \_\_\_\_\_

33 Do you offer transportation service for intoxicated customers?  Yes  No

34 Are customers permitted to consume hemp or cannabis products not purchased on site?  Yes  No

## On-Premise Consumption - Products & Promotions

35 What is the maximum THC content per serving of any drinks you serve for on-premise consumption? \_\_\_\_\_ mg

36 Do you serve THC shots?  Yes  No

a Maximum potency of shots: \_\_\_\_\_ mg

37 Do you serve THC Mixed Drinks or Mocktails?  Yes  No

a Do you use measuring/pouring devices for all THC mixed drinks?  Yes  No

b If cocktails are offered at various THC dosages, do you have a system to mark or designate the potency?  Yes  No  n/a

c Describe: \_\_\_\_\_

38 Do you offer multiple serving products for on-premise consumption?  Yes  No

a Describe: \_\_\_\_\_

39 Do you ever have THC product promotions? *2 for 1 specials, all you can drink, etc.*  Yes  No

a Describe: \_\_\_\_\_

40 Do you allow any drinking games/contests with either alcohol or hemp drinks?  Yes  No

## Events

41 Do you ever host Special Events (concerts, promoted entertainment, etc.)?  Yes  No

a Frequency: \_\_\_\_\_

b Type of Events: \_\_\_\_\_

42 Do you ever serve hemp products for consumption at premises other than the insured location?  Yes  No

a Frequency: \_\_\_\_\_

b Type of Events: \_\_\_\_\_

c Location(s): \_\_\_\_\_

## Regulatory & Claims History

43 Are you licensed or registered with any state regulatory bodies to manufacture, sell, distribute or serve hemp products?  Yes  No

44 Have you ever been assessed a fine for violation of a law or ordinance related to illegal activities or the sale of alcohol or hemp products?  Yes  No

*If yes, provide details and steps taken since the violation to prevent any future violations*

45 Have your liquor or hemp licenses ever been suspended or revoked?  Yes  No

*If yes, provide details*

46 Are you aware of any General, Product Liability, Liquor or Impairment-related claims or incidents that may give rise to a claim within the past five years, including those not covered by insurance?  Yes  No

*If yes, provide details*

47 Are you aware of any Adverse Events reported involving your products?  Yes  No

*If yes, provide details*

## Fraud Warning and Signature

WARNING - Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

By signing this application, the applicant warrants that all statements made in this application and supporting documentation are true and complete, and that no material facts have been misstated or concealed. It is understood & agreed that this form becomes a part of the policy & that underwriters hereon shall rely upon the information to determine the acceptability, rates & coverage.

All written statements and materials furnished to the company in conjunction with this application are hereby incorporated by reference into this application and made a part hereof.

It is further understood & agreed that the applicant and/or affiliated company is under a continuing obligation to immediately notify the underwriters through the insurance agent/broker of any material alteration to the information given.

Completion and submission of this Application does not bind the Company to sell nor the applicant to purchase this insurance. The applicant's acceptance of the Company's proposal is required before the applicant may be bound and a policy issued.

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Applicant Signature

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Date Signed

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Printed Name

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Title