



Conifer
Insurance
Company

**T.H.C. Supplemental Property
Application - Provisioning**

General Information

Named Insured: _____

DBA: _____

Location Address: _____

City, State, Zip Code: _____

Use: Medicinal Recreational Both
 Other: _____

Projected Sales for the next 12 months: _____

What are the total Sales for the last 12 months: _____

Hours of business:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Building Information

Year Built: _____ Number of Stories: _____ Square Footage: _____

Year of last update/ inspected: Roof: _____ Plumbing: _____

HVAC: _____ Electrical: _____

Construction Type: Frame Masonry Non-Combustible Fire Resistive

Does the applicant have an active central alarm system? Yes No

Are all windows and doors connected to an Active Central Station Alarm? Yes No

Does the applicant use a vault to secure cannabis finished stock? Yes No

Do you have a buzz in system or security personnel at the door? Yes No

Does the applicant have interior and exterior cameras? Yes No

Does the applicant maintain daily written records of all cannabis containing products including the purchase date, type of product and purchasing price? Yes No

Does the insured have an approved safe? Yes No

If Yes, please provide: Weight: _____ Fire Rating: _____

(Minimum requirements 700 lb. and 1 hour fire rating, under 2000 lbs. must be bolted to the ground)

I warrant the following to be true and I understand no coverage will be afforded by this policy for theft unless the following items are strictly adhered to:

1. During non-business hours, all "finished stock" on the premises must be kept in one of the following:
 - a. A locked 700 pound or greater safe which is bolted to the floor.
 - b. A locked Underwriter's Laboratory rated TI-15 safe or greater.
 - c. A locked one (1) ton or greater safe.
2. An operating and functional central station burglar alarm system must be installed at the premises which have contacts on all windows and doors that open to the outside. The alarm must have contacts on all windows and doors adjacent to common stairways and/ or hallways. Furthermore, the alarm must have functioning motion detectors which cover all rooms at the premises. This burglar alarm must be turned on and fully operational during non-business hours.
3. During business hours, all stock not on display for sale will be kept in a locked safe with the requirements as during non-business hours.
4. The insured must keep written records of all purchases of stock, including receipts when available, which includes the date of purchase, type(s) of stock purchased and purchase price. In the event of a stock claim, adjustment will be based on documented records. A copy of this record is to be kept at an offsite location.

_____ Applicant Signature

_____ Date

Property Coverage and Endorsements

Optional Deductibles:	<input type="checkbox"/> \$1,000	<input type="checkbox"/> \$2,500	<input type="checkbox"/> \$5,000	<input type="checkbox"/> \$10,000	
Valuation:	<input type="checkbox"/> RC	<input type="checkbox"/> ACV	<input type="checkbox"/> RFC		
Building Coverage:	\$ _____	Co-Insurance:	<input type="checkbox"/> 80%	<input type="checkbox"/> 90%	<input type="checkbox"/> 100%
Business Personal Property:	\$ _____	Co-Insurance:	<input type="checkbox"/> 80%	<input type="checkbox"/> 90%	<input type="checkbox"/> 100%
Improvements & Betterments:	\$ _____				
Business Income:	\$ _____	Co-Insurance:	<input type="checkbox"/> 25%	<input type="checkbox"/> 50%	<input type="checkbox"/> 100%
Finished Stock:	\$ _____				

Cultivation Questions

1. Does the applicant occupy the entire building? Yes No
 If No, please describe security measures to avoid unauthorized entry from other areas of building:

2. What percentage of total stock is on display during business hours?

3. Indicate the maximum amount of usable finished stock marijuana on the premises at any one time: _____
4. Does the applicant use a marijuana classification system to assist patients/ clients in identifying different plant traits, such as strength, type, flavor and density? Yes No
5. Does the applicant request police records and conduct background checks on:
- a. Employees Yes No
- b. Volunteers (who have access to marijuana stock): Yes No
6. Does the applicant have a formal written security procedure plan or manual? Yes No
- a. If Yes, does it include what to do in the event of a robbery/ break-in? Yes No
- b. Are all employees provided training on security procedures that apply during daily opening and closing operations? Yes No

I warrant the above to be true and I understand the insurance contract will be considered based on my warranty:

Applicant Signature

Date