



Manufacturing Program ACORD Supplement

(Required for all OnePac policies written in the Manufacturing Program – Submit with ACORD 125, 126 & 140)
 (If any information varies by building or premises, please use the “Notes” section to provide details)

Applicant's Name:	Agency Name:
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General Eligibility Questions – All Applicants

Is the applicant in full compliance with all life safety requirements and applicable building ordinances and laws?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If applicant stores any chemicals, explosives, flammables, fuels or solvents, are they stored in approved containers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is security provided at any building? If yes, check all that apply: Security Guard <input type="checkbox"/> Guard Dog <input type="checkbox"/> Other <input type="checkbox"/> (describe type in “Notes” section)	<input type="checkbox"/> Yes <input type="checkbox"/> No

General Underwriting Information – All Applicants

Does applicant own premises or conduct operations not described in this application? If yes, give details in “Notes” section.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is any building located less than one mile from the coast (ocean, gulf or bay)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the applicant ever been fined by any federal, state or local governmental agency or entity related to any past or current business operations?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Eligibility Questions – All Manufacturers

Do any buildings contain any of the following occupancies: electroplating or woodworking operations?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are receipts from rental, installation, repair and subcontracted work greater than 15% of total receipts?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the applicant modify or refurbish products made by others?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the applicant currently or has previously engaged in the sale or treatment of wood or wood products for fireproofing?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Underwriting Information – All Manufacturers

Have any of the applicant's products been recalled or discontinued?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the applicant's operations include an exposure to bio-hazardous and/or radioactive or nuclear materials?	<input type="checkbox"/> Yes <input type="checkbox"/> No
At all buildings, were the plumbing, heating and electrical systems process controls designed for the occupancy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are any of the following operations performed: coating, dipping, foundry operations, painting, spray painting, use of flammable glue, sawing, upholstering, varnish or welding?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are any of the following used in the manufacturing process or assembly: Caustics or corrosives, combustible materials, coating, dipping, flammable liquids, foundry operations, open flames, painting, plastics, sawing, spray painting, upholstering, use of flammable glues, varnish or welding	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there hydrants and adequate water available to fight a fire within the facility that is accessible and is the sprinkler system designed for the operation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are foreign products sold, distributed or used in components?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there a retail store in any location?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Underwriting Information – Specific Manufacturer Classifications

Bolt, Nut, Rivet, Screw and Washers; Cutlery (not powered) and Flatware; Electrical Parts, Components or Accessories Manufacturing; Machine Shops – NOC; Metal Goods Manufacturing; Metal Goods Manufacturing – Stamping – not Signs; Metal Works – Shop – Decorative or Artistic; Patterns (metal); Signs (electrical); Wire Goods –	
Does applicant offer a product design service? If yes, are design specifications provided in writing with copies retained by the shop?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the applicant make products for any of the following: Aerospace; Aircraft, Aviation; Automobile or Truck parts (that are critical to the operation or safety of the vehicle); Military Applications or Maritime Use?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the applicant make products for any of the following: Alarms; Athletic Equipment; Chemical Products; Farm or Industrial Machinery and Equipment; Finished Construction; Fire Suppression Equipment; Guns and Ammunition; Medical, Healthcare or Bio-Technology Products; Pressurized Containers; Safety Equipment; Structural Metal or Steel Products or Watercraft; or Floatation Devices??	<input type="checkbox"/> Yes <input type="checkbox"/> No
Bakery Plants; Beer, Ale or Malt Liquor Manufacturing; Candy or Confectionary Products; Fruit and Vegetable Juice Manufacturing; Water Bottling – Spring or Well - Does the applicant's operations include an exposure to bio-hazardous and/or radioactive or nuclear materials?	
Bakery Plants; Candy or Confectionary Products; Fruit and Vegetable Juice Manufacturing – Are all cooking and baking surfaces adequately protected and in compliance with NFPA standards and all local codes?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Printing –	
Does the applicant's operations include any: financial printing; print brokers; advertising material; printers that develop and design Web sites or print on material other than paper?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the applicant have a written quality control program in place to minimize releasing incorrect material? If yes, (1) are customers required to sign off on final proofs prior to printing? (2) is a copy of the signed form retained?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No

Location Information (the following information is required for each building)

Is applicant the sole building occupant? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is applicant a member of a franchise group? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is business in an enclosed shopping mall? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is business closed more than 60 consecutive days each year? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is there a restaurant or cooking operation in the building? <input type="checkbox"/> Yes <input type="checkbox"/> No	Building Condition: <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor <input type="checkbox"/> Very Poor
Quality of Construction: <input type="checkbox"/> Average (standard) <input type="checkbox"/> Economy <input type="checkbox"/> Superior	Basement of Building is: <input type="checkbox"/> Finished <input type="checkbox"/> Unfinished <input type="checkbox"/> No Basement

Optional Policy Level Coverages

<input type="checkbox"/> Printers Errors & Omissions – General Liability Limits apply

Optional Coverages by Building

<input type="checkbox"/> Equipment Breakdown Coverage
<input type="checkbox"/> Manufacturers Selling Price

Continued on Reverse

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