

Renewal Application COMMERCIAL PROPERTY & LIABILITY

SECTION A - GENERAL INFORMATION	
1. Name of Insured (Legal Business Name):	
2. Are there any additions/deletions to the Named Insured since policy inception?	Yes No
<i>If Yes, please provide details:</i>	
3. Policy Number:	4. Renewal Date:
5. Any change to the mailing address?	Yes No
<i>If Yes, what is the new mailing address?</i>	
<i>Street:</i>	<i>City:</i>
<i>Province:</i>	<i>Postal Code:</i>
6. Has the Insured had any prior property claims, liability claims or losses in the last 5 years?	Yes No
<i>If Yes, please provide details, or attach a detailed loss run:</i>	
7. Has there been any changes to the Insured's Health Canada License?	Yes No
<i>If Yes, please provide details:</i>	

SECTION B - PROPERTY	
1. Are there any material changes to the Insured's operations or premises?	Yes No
<i>If Yes, please provide details:</i>	
2. Are all locations occupied and fully operational?	Yes No
<i>If No, please provide details:</i>	
3. Are any locations currently undergoing or anticipate renovations/repairs in the upcoming term?	Yes No
<i>If Yes, please provide details:</i>	



4. Are there any changes to the fire & burglar alarm system? Yes No

If Yes, please provide details:

5. Are there any other changes or concerns? Yes No

If Yes, please provide details:

6. Are there any changes to the Insured limits? Yes No

*If Yes, please complete the table below. If more than three locations, please submit [updated SOV](#) provided. ** Please note BI is Profits form, and a limit must be provided.*

	Location #1	Location #2	Location #3
Building			
Equipment (includes Office Contents & Tenant's Improvements)			
Stock (breakdown required below)			
Electronic Data Processing			
Business Interruption - EBI			
Ordinary Payroll			
Extra Expense			
Contractors' Equipment (please attach schedule)			
Other:			
Other:			

7. Stock Valuation:

Cannabis & Hemp Stock Coverage: Check box to decline stock coverage.

STOCK COVERAGE LIMITS	Number of Plants	Per Plant Value	= Total Plants Values (Wholesale)
Seeds/Seedlings			
Clones			
Mother Plants			
Flowering Plants			
Harvested Plants			
Crop Value			
Finished Stock	Grams		

SECTION C- PREMISES/PRODUCT & COMPLETED OPERATIONS LIABILITY

1. List the Insured's projected gross revenue by category for the next 12 months (\$CAD)

Category:	Projected Revenue (\$CAD)
Cultivation:	
Processing:	
Distribution:	
Farm Gate:	
Laboratory & Testing:	
Other (please specify):	
Total for the next 12 months:	
Total gross revenue for the last 12 months:	

2. Cannabis Product list by type:

Cannabis Product	Revenue (100% CAD)	Revenue (100% CAD) Insured's Own Production	Revenue (100% CAD) Insured's Branded Products/Sold Under Others' Labels		
			%	/	%
Cannabis (seeds, leaves, buds, flower, trim)	%	%	%	/	%
Pre-rolls	%	%	%	/	%
Edibles (food)	%	%	%	/	%
Edibles (beverages)	%	%	%	/	%
Topicals	%	%	%	/	%
Extracts - inhalable	%	%	%	/	%
Extracts - ingestible	%	%	%	/	%
Total	%	%	%	/	%

3. Top two suppliers by Cannabis Product:

Supplier:	Product:
Supplier:	Product:



4. Non-Cannabis Product List by Type – Accessories or Merchandise:		
Product:	Revenue (100% CAD):	Supplier
Vape Cartridges (510 thread)	%	
Vape Batteries	%	
Disposable Vape Pens	%	
Rolling Papers (and other paper products)	%	
Conventional Food/Beverage Products	%	
Conventional Topical Products	%	
Other – please specify	%	

5. List and explain new products that will be introduced to the marketplace in the next 12 months:

6. List and explain all products that have been discontinued and why:

7. Are there any requested changes to the Premises/Products and Completed Operations Liability Limits?	Yes	No
<i>If Yes, please provide details:</i>		

Signed:

Date:

Name:

Title::