

40 Is any of the above equipment foreign made? _____
c0 If yes, please outline what equipment and lead-time to repair/replace _____

50 What is the replacement cost and replacement time of the equipment listed above?

60 Any critical equipment that can produce a bottleneck (less than 70% of normal output) in production if not in operation? _____
c0 If yes, please describe contingencies and redundancies in place to mitigate such loss: _____

70 Please describe the maintenance program for the equipment (inhouse, OEM, service contracts)?

80 Has there been any loss or equipment breakdown experience in the last 5 years? _____

Eqpepvt cvuGzvt cevqpp''

30 Please describe the types of types of concentrates you manufacture:

40 F q' qw' r' gt hqt o 'cp' { 'gzvt cevqppA _____
c0 If yes, what method(s) do you use? (please check all that apply)

- | | | | |
|--------------------------------|--------------------|----------------------|------------|
| Tincture | Butane Extraction | Hexane Extraction | Dry Ice |
| CO ₂ Extract. | Propane Extraction | Alcohol Distillation | Heat Press |
| Other (Please Describe): _____ | | | |

50 Kk' qwt 'qr gt cevqpp' wugu' eqo r t gugf lnc o c dng' i cu' gzvt cevqpp' u' ugo u' eqo r ngv' vj g' hmqy lpi <' _____
c0 Has the equipment been certified by an independent testing lab or engineer? _____

d0 Does a factory-trained technician install, service, and repair equipment? " **aaaaaaaaaaaaa''**

e0 Do you have a formal checklist to ensure that all equipment is operating within the manufacturer's specifications? " " " " " " **aaaaaaaaaaaaa**

f0 Are the pressure vessels inspected and tested per manufacturer's specifications? _____ "

g0 Are the extraction systems installed in a C1D1 or C1D2 compliant location? _____
k0 If not, please describe why:

60 Tgi ctf lpi 'vj g' grgevt kcrntu' ugo u<' _____
c0 Was a Load Analysis performed prior to occupancy to ensure electrical service is of capacity for the current operation and any anticipated future additions? _____

- b. Have the electrical systems been inspected and tested by a qualified electrician experienced with industrial systems, and are they compliant with the most recent NFPA 70 code? _____
- c. Are all electrical components for processing and flammable liquid/gas storage areas rated for Class 1 Division 1? _____
- d. Is all processing equipment grounded and bonded? _____
- e. Has all temporary wiring been replaced with permanent wiring fully compliant with NFPA 70? _____

Commercial Kitchen

- 1. Does the kitchen have a UL 300 Compliant, wet chemical fire suppression system with nozzles covering all cooking surfaces? _____
- 2. Do your products require open flame cooking or deep frying? _____
 - a. If yes, are all open flame cooking and or frying operations conducted under a non-combustible powered ventilation hood? _____
 - b. Does the cooking/frying equipment have an automatic fuel supply cutoff? _____
- 3. How often is the fire suppression system serviced? _____
 - a. Is this servicing done by a licensed 3rd party service contractor? _____
 - b. If yes, does this contractor name you as additional insured under their policy? _____
- 4. How often are the hoods and ducts cleaned? _____
 - a. Is this servicing done by a licensed 3rd party service contractor? _____
 - b. If yes, does this contractor name you as additional insured under their policy? _____

APPLICANT’S WARRANTY STATEMENT

I have read this application and I declare that to the best of my knowledge and belief, all of the foregoing statements are true and accurate, and that these statements are offered as an inducement to issue the policy for which I am applying. I acknowledge and agree that all representations made in this application are material and that if Golden Bear Insurance Company insures my cannabis business, that Golden Bear has done so in reliance on my representations.

Applicant Signature

Date

Producers Signature

Date

Applicant’s Title

Producer License No.

State of License