



**CONTRACT DIVISION - GENERAL CONTRACTOR and PROJECT MANAGER - SUPPLEMENTAL APPLICATION**

ACORD Application also required - Check all applicable check boxes below

**General Agent:**

**Date:**

**Insured:**

**Insured Mailing Address:**

**Insured's Web Address:**

**Insured Contact Name:**

**Phone Number:**

**PROHIBITED** (check all that apply to your operations)

- General Contracts and/or Project Managers with exposures to new-ground-up multi-family residential (i.e. apartments, condos, co-ops, townhomes, tract homes).
- Custom Single-Family Homebuilders who subcontract out most of their work are acceptable subject to underwriting guidelines (maximum of 6 new starts per year). Requires separate application, underwriting, rating and forms.

All of the following exposures are prohibited, even if subcontracted (check all that apply):

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Airport facilities           | <input type="checkbox"/> Equip.Rental to third parties | <input type="checkbox"/> Shoring or underpinning      |
| <input type="checkbox"/> Boring                       | <input type="checkbox"/> Hazardous material abatement  | <input type="checkbox"/> Stadium construction         |
| <input type="checkbox"/> Boiler inspection            | <input type="checkbox"/> Landfills                     | <input type="checkbox"/> Stevedoring                  |
| <input type="checkbox"/> Bldg/Structure—raise or move | <input type="checkbox"/> Nuclear                       | <input type="checkbox"/> Subaqueous                   |
| <input type="checkbox"/> Cantilevered construction    | <input type="checkbox"/> Pile Driving                  | <input type="checkbox"/> Subways                      |
| <input type="checkbox"/> Cofferdam or caisson work    | <input type="checkbox"/> Pipelines                     | <input type="checkbox"/> Tank construction or removal |
| <input type="checkbox"/> Dams / Levees / Reservoirs   | <input type="checkbox"/> Power generating facilities   | <input type="checkbox"/> Tower construction           |
| <input type="checkbox"/> Drilling                     | <input type="checkbox"/> Railroad related              | <input type="checkbox"/> Tunnels                      |
| <input type="checkbox"/> EIFS or EIFS related work    | <input type="checkbox"/> Reclamation                   | <input type="checkbox"/> Wrap up participation        |

**YEARS IN BUSINESS / EXPERIENCE**

\_\_\_\_\_ Years in business as the 'Named Insured' indicated on this application  
\_\_\_\_\_ Years' experience in the operations indicated on this application - Attach resumes if available

Has applicant had an insurance policy cancelled or non-renewed in past 3 years? If yes, explain.  
*'Missouri Applicants - Do not answer this question)*

- Applicant in receivership
- Bankruptcy (Chapter 7, 11 or 13) has been filed in past 5 years

**LICENSING**

Licensed License Number: \_\_\_\_\_ Year License Issued: \_\_\_\_\_

**CONTRACTOR and PROJECT MANAGER - SUPPLEMENTAL APPLICATION**

**CONTRACTS**

- Written contracts are always used with third parties. If not, explain:

**LOSS HISTORY**

- Three years of loss history information on ACORD application or attached to this application

**OPERATIONS**

- States where work is anticipated during the policy term:

<b>Commercial Work – New-Ground-Up Construction</b>	<b>%</b>
<b>Commercial Work – Remodeling (including additions)</b>	<b>%</b>
<b>Residential Work – New-Ground-Up Construction</b>	<b>%</b>
<b>Residential Work - Remodeling (including additions)</b>	<b>%</b>
<b>Total of above percentages must equal 100%</b>	<b>100%</b>

\*\*If any of the following are checked the Construction Project Manager exposure needs to be re-classified, underwritten, priced and issued per the following:

- Consult on or manage projects that include new residential construction (re-classify as Custom Homebuilder)
- Engage in actual construction work (reclassify as an Executive Supervisor)
- Hire (including authority to dismiss/fire) subcontractors (Re-classify as an Executive Supervisor)
- Supervise subcontractors (reclassify as an Executive Supervisor)

<b>Exposure</b>	<b>% of Operations</b>
Construction Project Manager **	%
Consultant	%
Developer	%
General Contractor	%
Owner / Builder	%
Subcontractor	%
Other (Describe)	%
Other (Describe)	%
Other (Describe)	%

**EXPOSURES**

- Above Grade work exceeds 20 feet. \_\_\_\_\_ Maximum height in feet \_\_\_\_\_ % of work above 20 feet
- Below Grade work exceeds 3 feet \_\_\_\_\_ Maximum depth in feet \_\_\_\_\_ % of work below 3 feet
- Multi-family habitational related work (apts, condos, coops, townhouses, tract homes) % of operation: \_\_\_\_\_%
- Rental of Mobile Equipment with or without operators to third parties. Describe:

- Roofing (If payroll exceeds \$7500 for roofing a roofing supplemental application required)
- Vanish, Lacquer, Paint, Glue or similar finish exposures
  - All required equipment and procedures in place for finishing related work, including proper disposal of rags to prevent spontaneous combustion

**Additional exposures not mentioned above:**

**CONTRACTOR and PROJECT MANAGER - SUPPLEMENTAL APPLICATION**

**SUBCONTRACTORS**

- Uninsured subcontractors are not acceptable. Exceptions are allowed in Texas subject to Company guidelines.
- Risk Transfer – Subcontractors:
  - A.I.A. Standard is followed when establishing contracts with subcontractors
  - Additional Insured – Status granted to you on the subcontractor’s policy
  - Certificates of Insurance - Always obtained from a subcontractor prior to any work being done for you.
  - Hold Harmless and Indemnification Agreements – Required from subcontractors
  - Job to Job - Same set(s) of subcontractors usually used
  - Limits of Liability - Subcontractors are required to carry limits equal or above your own
  - Uninsured Subcontractors – Sometimes used – Explain:

- Workers Compensation (if applicable) – Subcontractors required to have their own WC

**PAYROLLS and COSTS**

Class	Employee Payroll	Sub Cost	Class	Employee Payroll	Sub Cost
Alarm Systems	\$	\$	Painting	\$	\$
Asbestos Removal	\$	\$	Paving Driveways/ Parking	\$	\$
Blasting	\$	\$	Paperhanging	\$	\$
Bridges / Elevated Roads	\$	\$	Plastering / Stucco	\$	\$
Carpentry	\$	\$	Plumbing	\$	\$
Communication Lines	\$	\$	Power Lines	\$	\$
Concrete	\$	\$	Process Piping	\$	\$
Debris Removal	\$	\$	Roofing	\$	\$
Demolition	\$	\$	Seismic Retrofitting	\$	\$
Drywall	\$	\$	Septic Tanks	\$	\$
Earthquake Repair	\$	\$	Sewer	\$	\$
Electrical	\$	\$	Sheet Metal Work	\$	\$
Excavation	\$	\$	Siding	\$	\$
Fire Damage Restoration	\$	\$	Sprinklers	\$	\$
Gas / Water Mains	\$	\$	Steel / Ornamental	\$	\$
Grading of Land	\$	\$	Steel / Structural	\$	\$
HVAC	\$	\$	Street / Road	\$	\$
Insulation	\$	\$	Supervisory	\$	\$
Landscaping	\$	\$	Swimming Pools	\$	\$
Lead Remediation	\$	\$	Tile / Stone / Marble	\$	\$
Masonry	\$	\$	Waterproofing	\$	\$
Mold/Spore Remediation	\$	\$	Water Damage Restoration	\$	\$
Oil or Gas Field Related (describe):	\$	\$	Other (describe):	\$	\$

**NUMBER OF EMPLOYEES**

- Total Number of Employees (include leased employees): \_\_\_\_\_

**CONTRACTOR and PROJECT MANAGER - SUPPLEMENTAL APPLICATION**

**PAYROLLS / COSTS – COMBINED TOTALS**

All Owner Payroll (Cap at \$16,000 per Owner)	\$
All Employee Payroll (if any)	\$
All Leased Employee Payroll (if any)	\$
Cost of Insured Subs (if any)	\$
Cost of Uninsured Subs (if any)	\$

**RECEIPTS**

All Operations	\$
----------------	----

**DISCONTINUED OPERATION(S) / DISCONTINUED NAMED INSURED(S)**

- Acted in the capacity of a General Contractor and/or Construction Project Manager on new-ground-up residential construction (defined as apartments, condos, co-ops, homes or townhomes) in past 10 years. Indicate specific year(s) of this type of exposure, number of units for the respective year(s) and the location(s) below:

- Operated under a different 'Named Insured(s)' in the past 10 years. Indicate the Named Insured(s) and corresponding operations below:

- Discontinued Operations for this application's Named Insured(s) in the past 10 years. Provide details below:

**COVERAGE OPTIONS - LIABILITY** (check if you would like a quote on any of the following)

- Employee Benefit Liability – U058
- Employment Practices Liability Insurance – U817 (Not available in AR, LA, MT, NM, NY, VT)
- High Limits General Liability
- Identity Recovery (i.e. Identity Theft) – U651
- Landscapers – Care, Custody and Control – U682
- Medical Expense Limit of \$10,000 rather than \$5,000
- Overspray Coverage Limitation – U679
- Pollution Exclusion – Limited Exception for Short-Term Event – U680
- Professional Extension – Contractors Professional Liability Coverage Limitation – U146
- Property Damage Extension for Locksmiths – U082
- Stop Gap Liability – U066
- Storage Tank Pollution Liability
  - For all appointed Argo Pro (Environmental) agents, Storage Tank Pollution Liability coverage is available. Ask your agent for a complete application for Storage Tank Pollution Liability Insurance if this coverage is needed. Forward all applications to: [env@colonyins.com](mailto:env@colonyins.com)

**COVERAGE OPTIONS - PROPERTY** (check if you would like a quote on any of the following)

- Building Ordinance or Law (Increased Cost of Construction) – U750
- Equipment Breakdown – U522 & U523
- Property Coverage Enhancement (choose only one):  Bronze – U777C  Silver – U777B  Gold – U777C
- Water Back Up and Sump Overflow – U548

**GENERAL CONTRACTOR and PROJECT MANAGER - SUPPLEMENTAL APPLICATION**

**GENERAL FRAUD STATEMENT (Not applicable in all states.)**

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, may be committing a fraudulent insurance act, and may be subject to a civil penalty or fine.

*The undersigned is an authorized representative of the applicant and certifies that reasonable inquiry has been made to questions on this application. He/She certifies:*

- The answers are true, correct and complete to the best of his/her knowledge.*
- They agree to the Privacy and Fraud provisions found in the ACORD-125 (Commercial Insurance Application) and understand those provisions also apply to this supplemental application.*

**SIGN AND DATE**

PRODUCER'S SIGNATURE	DATE
APPLICANT'S PRINTED NAME	DATE
APPLICANT'S SIGNATURE	DATE