



Contractors Supplemental

1. Applicant Name: _____ Phone: _____ - _____ - _____
2. Applicant Address: _____
3. Agency: _____ Agent/Producer: _____
4. Agency Address: _____ Phone: _____ - _____ - _____
5. How many years has the applicant been in business under this name? _____
6. How many years of experience does the applicant have in this field?: _____
7. Has the applicant operated under any other name(s)? Yes No
 If yes, please list the name and describe the nature of operations and advise whether the entity is still in operation: _____

8. Please check what best describes the applicant's operations
 General Contractor Subcontractor Real Estate Developer
 Construction Manager Architect / Engineer Other: _____

9. Please provide a complete description of the applicant's operations: _____

10. What are the applicant's projected gross receipts?: \$ _____
 - What are the applicant's projected subcontracted costs?: \$ _____
 - What were the applicant's gross receipts on their expiring policy?: \$ _____
 - What were the applicant's subcontracted costs on their expiring policy?: \$ _____

11. Please list the five largest projects undertaken in the past five years by the applicant:

Description	Cost	Duration

12. Percentage of work that will be done by the applicant:

	New	Renovation		New	Renovation
Single Family Homes	%	%	Office Buildings	%	%
2-4Family Dwellings	%	%	Mercantile Buildings	%	%
Apartments	%	%	Institutional Buildings	%	%
Condominiums	%	%	Industrial Buildings	%	%
Townhouses	%	%	Other:	%	%

13. Please indicate whether or not work is performed by the applicant in any of the following areas:

<input type="checkbox"/> Yes <input type="checkbox"/> No	Airport Facilities	<input type="checkbox"/> Yes <input type="checkbox"/> No	Pipeline Construction
<input type="checkbox"/> Yes <input type="checkbox"/> No	Street, Road or Highway Construction	<input type="checkbox"/> Yes <input type="checkbox"/> No	Pollution Abatement
<input type="checkbox"/> Yes <input type="checkbox"/> No	Blasting or Explosion Hazard	<input type="checkbox"/> Yes <input type="checkbox"/> No	Boring Under Streets or Roads
<input type="checkbox"/> Yes <input type="checkbox"/> No	Boiler Inspection, Service or Repair	<input type="checkbox"/> Yes <input type="checkbox"/> No	Tower Construction
<input type="checkbox"/> Yes <input type="checkbox"/> No	Race Track or Stadium Construction	<input type="checkbox"/> Yes <input type="checkbox"/> No	Caisson or Cofferdam Work
<input type="checkbox"/> Yes <input type="checkbox"/> No	Bridge or Elevated Highway Construction	<input type="checkbox"/> Yes <input type="checkbox"/> No	Equipment Rental
<input type="checkbox"/> Yes <input type="checkbox"/> No	Waste & Reclamation Facilities	<input type="checkbox"/> Yes <input type="checkbox"/> No	Sewer Main Construction
<input type="checkbox"/> Yes <input type="checkbox"/> No	Cantilevered Construction	<input type="checkbox"/> Yes <input type="checkbox"/> No	Tank Construction
<input type="checkbox"/> Yes <input type="checkbox"/> No	Pier or Wharf Construction	<input type="checkbox"/> Yes <input type="checkbox"/> No	Tunnel Construction
<input type="checkbox"/> Yes <input type="checkbox"/> No	Pile Driving	<input type="checkbox"/> Yes <input type="checkbox"/> No	Railroad Construction
<input type="checkbox"/> Yes <input type="checkbox"/> No	Power Generating Facilities		

14. What is the maximum number of individual units the applicant will build in any one development?: _____

15. What are the total projected annual individual units to be constructed?: _____

16. Has the applicant ever been involved in the construction of tract housing, condominiums or townhouses?:
 Yes No If yes, please explain: _____

17. Does the applicant or has the applicant ever built on hillsides, over landfills or in subsidence areas?:
 Yes No If yes, please explain: _____

18. Does the applicant or has the applicant ever used synthetic stucco or EIFS?:
 Yes No If yes, please explain: _____

19. Has the applicant ever been involved in or is the applicant aware of pending litigation concerning defective workmanship?:
 Yes No If yes, please explain: _____

20. Does the applicant perform any work over 3 stories?
 Yes No If so, how high?: _____

21. Does the applicant lease or rent equipment to others? Yes No
If yes, is it with an operator? Yes No
If yes, what are the applicants anticipated rental receipts?: \$ _____
If yes, what type of equipment does the applicant rent?: \$ _____

22. Does the applicant operate mobile equipment over public roadways? Yes No

23. Does the applicant draw, design, or consult for any project? Yes No
If the applicant uses sub-contractors, please answer question 24

24. Does the applicant use subcontractors? Yes No If yes, does applicant require subcontractors to:
a. Name the applicant as additional insured on their liability policies? Yes No
b. Sign an indemnification or hold harmless agreement in the applicant's favor?: Yes No
c. Furnish certificates of insurance for general liability? Yes No
If yes, what are the minimum limits required?: _____
d. Furnish certificates of insurance for Workers' Compensation Yes No

25. Does the applicant's safety / risk management program include:
Formal safety manual Yes No Site safety inspections Yes No
Accident reporting / investigation procedures Yes No Certificate of insurance monitoring / control Yes No

26. Loss summary (please attach company generated hard copy loss runs with this application)

Year	Carrier	Premium	# of Claims	Incurred	Comments

27. Does the applicant perform any roofing operations? Yes No
If yes, please complete the following. What % of the applicants' work is:

Residential _____ %	Commercial _____ %	Industrial _____ %
a) New Construction _____ %	a) New Construction _____ %	a) New Construction _____ %
b) Repair/Patching _____ %	b) Repair/Patching _____ %	b) Repair/Patching _____ %
c) Replacement _____ %	c) Replacement _____ %	c) Replacement _____ %
= 100%	= 100%	= 100%

What type(s) of roof(s) does the applicant perform work on? Pitched roofs: _____ % Flat roofs: _____ % = 100%

What type(s) of roofing applications does the applicant perform? (Please check all that apply and give the percentage)

Hot Tar: _____ %	Polyurethane foam: _____ %
Tile: _____ %	Wood Shake / Shingle: _____ %
Slate: _____ %	Hot Composition: _____ %
Metal / Aluminum: _____ %	Other: _____ %

If hot tar is used, explain in detail the process and what safety precautions are used: _____

Does the applicant use any type of spray method for applying roofing materials? Yes No
If yes, are flammable liquids or catalysts used? Yes No
Does the applicant install any type of elastomer roof covering? Yes No

If yes, does the elastomer installation require use of flammable liquid or open fire? Yes No
 Are all jobs inspected by a foreman or the applicant at completion before leaving the job site? Yes No

28. Contractual Liability / Additional Insureds

Please list all parties for whom the applicant has contracts and/or hold harmless agreement(s), whether written or oral.

Name & Address	Date of Contract	Interest	Additional Insured

Additional Underwriting Questions

- Is the applicant involved (past, present, or intended future) in new residential construction, and/or development of, more than 10 single family dwellings, town home units or condominium units, in one development, in any one year? *Units are defined as each town home unit or condominium unit.* Yes No
- Does the applicant's cost of subcontractors exceed 30% of gross receipts? Yes No
- Do the applicant's gross receipts exceed \$3,000,000 for any one given year? Yes No
- Has the applicant been in business less than a year with less than 2 years experience? Yes No
- Are any of the applicant's operations in Arizona, California, Colorado or Nevada? Yes No
- Has the applicant had any OSHA violations? Yes No
- Is the applicant a general contractor, real estate developer or construction manager? Yes No
- Has the applicant ever been named in a suit for defective workmanship? Yes No
- Does the applicant own real estate development property? Yes No
- Does the applicant employ architects or engineers? Yes No
- Does the applicant have any current or prior projects involving use of exterior insulation and finish systems (EIFS / synthetic stucco)? Yes No

FRAUD STATEMENT

I DECLARE THAT THE STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND TRUE.

Any person who, with the intent to defraud or knowing that he or she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement may be guilty of insurance fraud and subject to fines and/or imprisonment. Any changes in your operation prior to the inception date of the policy or during the policy term must be reported to your agent.

 Signature of Applicant Title Date

 Signature of Retail Agent Date