

CONTRACTOR'S SUPPLEMENTAL APPLICATION

(Include Acord Application)

			Location A				
Licenso Any pr	n business:	Years of experience: Year of license: nother other state? General Contractor	License No%%	#:	Kind of	License:	
1.	•	ations owned, operated, or mana		Yes	No		
		where for these operations?		Yes	No		
2.	2. Does any of your construction management work involve supervision of subs whose co directly under your control? Yes						ts are not
	Please explain:						
3.	Radius of operations from	m main location:		States worked in:			
4.	Payroll of owners, office		\$				
	Payroll of employees oth Cost of leased, temporary	\$					
	Total payroll			,		\$	
5.	Do you employ any licen	nsed architects, surveyors, engine	eers, Real Esta	ate agents or brokers	s?	Yes	No
6.	Do you have any prior or planned jobs covered under "wrap-up" or OCP policies?					Yes	No
	Explain:						
7.	List the percentage of wo	ork you have done or plan to do	in the following	ng categories:			
	Overall operations:	Commercial% Pul Other (explain)%	h1: a Waulaa	0/ D :1 /:		0.4	

Commercial: New	_% or Remodel	%	Residential: New% or Remo	del%
Industrial		%	Apartments	%
Institutional		%	Condominiums/Townhouses	%
Mercantile		%	Custom Homes	%
Office		%	Tract Homes	%
Remodeling – Structural		%	Remodeling – Structural	%
Remodeling – Nonstructural		%	Remodeling – Nonstructural	%
Other:		%	Other:	%
Have you ever been or are cur	rrently involved in any	v residential pr	roject exceeding six (6) homes/units?	Yes No

8.	SUBCON	TRACTORS							
	Do you obtain Certificates of Insurance for GL and WC from all subcontractors?						No		
	What are t								
	Are writte	Yes	No						
	Do all con	Yes	No						
	Are you n	Yes	No						
	Do you no	Yes	No						
	Do you us	e any casual labor?				Yes	No		
	Do you us	e any leased employe	ees'	? If yes, provide copy of con	tract.	Yes	No		
	Are you re	esponsible for providi	ng	benefits, Worker's Compen	sation for these employees?	Yes	No		
	What perc	entage of your work	do	you sub out?			%		
	Do you ca	rry Worker's Compe	nsa	tion insurance?		Yes	No		
9.	Please pro	vide your gross sales	fo	each of the 5 past years and	d an estimate for the next 12 m	nonths:			
		Year		Payroll	Receipts	Subcontra	actors Cost		
	year			y - v					
	year								
	r year								
	r year								
Last year									
Projecte	ed next 12 n	nonths							
10.	Describe y	your three largest proj	ject	s currently underway or pla	nned for the next year, includi	ng values:			
Star	t Date	End Date		Value	Descri	otion			
			\$						
			\$						
			\$						
11.	Describe y	our four largest proje	ects	over the past five years, inc	cluding values:				
Year C	Completed	Value			Description				
		\$							
		\$							
		\$							
		\$							
		\$							
12.	2. Please provide the dollar value of an average completed job: (including all materials, equipment, and labor) \$								
13.	. How many additional insured endorsements do you anticipate needing in the next year?								
14.	Is there any equipment rental to others? Yes No If yes, sales/receipts: List equipment:								
	Анасп а с	opy of the contract.							

15.	Do you lease mobile equipment?		Yes	No	With op	erators?	Yes	No	
	Type of equipment:		Yes						
	Do you use cranes?		Yes	No	Maximu	ım length	of boom:		
16.	Do you or have you performed repa	airs of fire	damage,	, water	damage, or mold d	amage?	Yes	No	
17.	Do you use explosives?		Yes	No					
	If yes, please explain:								
18.	Any flammables stored on site?		Yes	No	In approved	container	rs?	Yes	No
	If yes, please explain:								
19.	Have you done or do you plan any	work perf	formed fo	r:					
	Refineries	Yes	No		Gas Stations	Yes	No		
	Chemical Plants	Yes	No		Airports	Yes	No		
	Railroads	Yes	No		Hospitals	Yes	No		
	Public Utilities	Yes	No		Hospitals	1 03	110		
	Please explain:								
20									
20.	Have you done or do you plan any		_						
	Caissons	Yes	No		Piers			Yes	No
	Retaining Walls	Yes	No		Shoring			Yes	No
	Underpinning	Yes	No		Other structural e	engineerin	g?	Yes	No
	Please explain:								
21.	Have you in the pact or do you plan	any worl	k to be ab	ove tw	o stories in height?		Yes	No	
41.	Have you in the past or do you plan any work to be above two stories in height? Yes Percentage: % What is the maximum height?								
	Please explain:	what is t	ile maxii	num ne	ignt:				
22.	Have you in the past or do you plan any work to be performed below ground level? Yes Percentage: % What is the maximum depth? Please explain:						No		
23.	Have you in the past or do you plan					ndfills?	Yes	No	
	Maximum degree of slope:								
24.	Have you in the past or do you plan	any repa	ir, replac	e or nev	v roofs?		Yes	No	
	Percentage of heat applications: % Percentage of membrane roofing:								
	Please explain:							_	
25.	In the past three years, have you be	en fired o	r replace	d on a j	ob in progress?			Yes	No
	Have you replaced another contract	Yes	No						
	Please explain:								
	Were there any claims, losses, or so	uits agains	st you in	the past	five years?			Yes	No
	Are there any claims or legal action	ns pending	g against	any of t	he entities named i	n the appl	ication?	Yes	No
	Do any of the entities named in the							vent, co	ndition, or
	damage to any person or property t	hat may p	otentially	give ri	se to any future cla	im or lega	al action?		
								Yes	No
	Have you been accused of faulty co	onstruction	n in the p	ast five	years?			Yes	No
	Have you been accused of breaching	ig a contra	act in the	past fiv	re years?			Yes	No

26. Complete the following table as applicable:

Class	Subbed (Cost	Employee	Payroll	None
Abatement/Asbestos, Lead, Environmental Cleanup	\$	%	\$	%	
Air Conditioning/Heating	\$	%	\$	%	
Alarm Systems	\$	%	\$	%	
Blasting	\$	%	\$	%	
Boiler Installation	\$	%	\$	%	
Caisson or Cofferdam Work/Dam	\$	%	\$	%	
Carpentry – Dwellings	\$	%	\$	%	
Carpentry – Interior	\$	%	\$	%	
Carpentry – Other	\$	%	\$	%	
Concrete Construction/Repair –	\$	%	\$	%	
Driveways, Sidewalks or Parking Areas					
Concrete Construction/Repair –	\$	%	\$	%	
Foundations, Flat Work / Tiltup Work					
Drilling	\$	%	\$	%	
Drywall/Wallboard Installation	\$	%	\$	%	
Earthquake Reinforcement	\$	%	\$	%	
Electrical Work – Within Buildings	\$	%	\$	%	
Electrical Work – Other	\$	%	\$	%	
Escalator/Elevator – Install, Maintenance, Repair	\$	%	\$	%	
Excavating/Grading of Land	\$	%	\$	%	
Fireproofing	\$	%	\$	%	
Gas Mains/LPG Work	\$	%	\$	%	
Gas Pumps	\$	%	\$	%	
Insulation	\$	%	\$	%	
Masonry –	\$	%	\$	%	
(EIFS Work-synthetic stucco, retaining wall work)					
Mechanical	\$	%	\$	%	
Millwright/Industrial Machinery	\$	%	\$	%	
Painting	\$	%	\$	%	
Plastering	\$	%	\$	%	
Playground Equipment – Maintenance or Repair	\$	%	\$	%	
Pile Driving	\$	%	\$	%	
Plumbing – Residential	\$	%	\$	%	
Plumbing – Commercial	\$	%	\$	%	
Road, Highway, Bridge, Overpass	\$	%	\$	%	
Roofing – Residential	\$	%	\$	%	
Roofing – Commercial	\$	%	\$	%	
Seismic Work/Repair Describe:	\$	%	\$	%	
Sewer/Water Mains	\$	%	\$	%	
Sprinkler Installation (Buildings)	\$	%	\$	%	
Steel – Ornamental	\$	%	\$	%	
Steel – Structural	\$	%	\$	%	
Supervisory Only	\$	%	\$	%	
Swimming Pool Construction	\$	%	\$	%	
Traffic Signals/Controls Describe:	\$	%	\$	%	
Tunneling	\$	%	\$	%	
Underground Tank Removal/Installation	\$	%	\$	%	
Waterproofing	\$	%	\$	%	
Wrecking/Demolition	\$	%	\$	%	

,	1 1	tion concerning any fact material thereto, commits a f the parties to complete the insurance transaction.
Applicant's Signature	Producer's Signature	 Date