CONTRACTORS SUPPLEMENTAL LIABILITY APPLICATION

PREQUALIFICATION (Refer to Contractors section of the Underwriting Guide for additional restrictions)

		Yes	No
1.	Are you involved (past, present or intended in 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.*	☐	☐
2.	Does your cost of subcontractors exceed 30% of gross receipts?	☐	☐
3.	Do your gross receipts exceed $3,000,000?	☐	☐
4.	Have you been in business less than a year with less than 2 years experience?	☐	☐
5.	Are your operations in Arizona, California, Colorado or Nevada?	☐	☐
6.	Have you had OSHA violations?	☐	☐
7.	Are you a general contractor, real estate developer or construction manager?	☐	☐
8.	Have you been named in a suit for defective workmanship?	☐	☐
9.	Do you own real estate development property?	☐	☐
10.	Do you employ architects or engineers?	☐	☐
11.	Do you have any current or prior projects involving the use of exterior insulation and finish systems (EIFS aka synthetic stucco)?	☐	☐

IF YES TO ANY OF THE ABOVE, THE RISK IS NOT ELIGIBLE FOR COVERAGE.

BUSINESS INFORMATION

1. Named Insured _____

2. Have you operated under any other name(s)? ☐ Yes ☐ No
If yes, list name, address and years in operation. _____

3. Years in current business _____ Years of experience as a contractor _____

4. Contractors License No. and type _____

TYPE OF CONTRACTOR

5. Provide complete description of your operations (type of work you do, new or remodeling/renovation, any demolition/ gutting and rebuild, tenant buildout/improvements, complete buildings or room additions, non-structural remodels, seismic retrofit, etc.)**:** _____
_____

6. Percent of your work performed by or on behalf of the named insured:

A.		**B.**		**C.**		**D.**	
New Construction	_____%	Outside Building	_____%	Residential	_____%	Your employees	___%
Remodeling	_____%	Inside Building	_____%	Commercial	_____%	Subcontractors	___%
Repairs	_____%	_____		Industrial	_____%	_____.	
TOTAL	**100%**	**TOTAL**	**100%**	**TOTAL**	**100%**	**TOTAL**	**100%**

7. Do you specialize in any part of the construction of the following types of buildings? ☐ Yes ☐ No
If yes, mark as many as are applicable: ☐ Nursing Homes ☐ Condominiums ☐ Hotels/Motels ☐ Day Care Centers ☐ Apartments ☐ Hospitals ☐ Multi-family Habitational
If yes, explain. _____

8. Indicate whether the following types of work are done by your employees or are performed by subcontractors:
E – Employees S – Subcontractors N/A – Not Applicable

	E	S	N/A		E	S	N/A
Carpentry	☐	☐	☐	Landscaping	☐	☐	☐
Concrete	☐	☐	☐	Masonry	☐	☐	☐
Electrical	☐	☐	☐	Painting	☐	☐	☐
Excavation	☐	☐	☐	Plastering or Sheetrock - inside	☐	☐	☐
Debris Removal	☐	☐	☐	Plumbing	☐	☐	☐
Demolition	☐	☐	☐	Roofing	☐	☐	☐
Drywall/Wallboard	☐	☐	☐	Stucco or Plastering - outside	☐	☐	☐
Framing	☐	☐	☐	Other (describe) _____			
Grading	☐	☐	☐	_____			

ROOFING OPERATIONS

	Yes	No
9. Do you perform any roofing operations? If "Yes" complete the following:	☐	☐

What percentage of your roofing work is performed on:

9A. Residential _____% (homes, condos, townhouses)		**9B. Commercial _____%** (office buildings, schools, retail)		**9C. Industrial _____% = 100%** (manufacturing plants, warehouses)	
Of Residential roofing:		**Of Commercial roofing:**		**Of Industrial Roofing:**	
a. New Construction	_____%	a. New Construction	_____%	a. New Construction	_____%
b. Repair/Patching	_____%	b. Repair/Patching	_____%	b. Repair/Patching	_____%
c. Replacement	_____%	c. Replacement	_____%	c. Replacement	_____%
Each must total 100%	**100%**		**100%**		**100%**

9D. What type of roofs do you work on? Pitched Roofs _____% Flat Roofs _____% = **100%**

What type of roofing applications do you perform? Check type of roof and give percentage:

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

9E. If hot tar or torch is used, explain in detail the process and what safety precautions are used: _____

_____

_____

9F. Do you use any spray method for applying roofing materials? ❑ Yes ❑ No
If yes, are flammable liquids or catalysts used? ❑ Yes ❑ No

9G. Do you 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

9H. Are all jobs inspected by a foreman or the contractor at completion before leaving job site? ❑ Yes ❑ No

ALL OTHER OPERATIONS

	Yes	No
10. Do you rent or loan machinery or equipment to others?	☐	☐
11. Do you perform work more than three stories in height above grade? If yes, percentage _____% Describe. _____	☐	☐
12. Do you perform work below grade? If yes, percentage? _____% Describe. _____	☐	☐
13. Is job site security provided at night? If yes, describe. _____	☐	☐
14. Do you or have you ever built on hillsides, slopes, landfills, or other terrain susceptible to subsidence? If yes, explain. _____	☐	☐
15. Are you now, or have you ever been, involved in the construction of new properties which are located in tract developments having more than ten (10) homes, townhomes or condominiums per year, including conversions or single family dwellings?	☐	☐
16. Do you draw any plans or blueprints used in your construction work? If yes, describe. _____	☐	☐
If yes, do you carry Professional Liability or Errors and Omissions insurance?	☐	☐

17. **CONTRACTUAL LIABILITY/ADDITIONAL INSUREDS**
Please list all parties for whom you have signed a contracts and/or hold harmless agreement, whether written or oral (contracting parties, date of contract, additional interest, cost)

NAME & ADDRESS	DATE OF CONTRACT	INTEREST	ADD'L INSURED
			☐
			☐

(PLEASE ATTACH COPIES OF ANY CONTRACTS)

INDEPENDENT CONTRACTORS

	Yes	No
18. Do you require subcontractors to sign a hold-harmless or indemnification agreement in your favor?	☐	☐
19. Do you use a standard contract with all of your subcontractors?	☐	☐
20. Do you require subcontractors to provide you with the following information:		
a. Proof of General Liability insurance with coverage and limits equal or greater than your own?	☐	☐
b. Name you as an Additional Insured?	☐	☐
c. Furnish Certificates of Insurance for General Liability and Workers Compensation?	☐	☐
d. Are these records kept by you?	☐	☐

21. Total cost of work subcontracted to others: $_____

HISTORY

	Yes	No
22. Have you been involved in any other business besides contracting?	☐	☐
If yes, describe. _____		
23. Have you ever been involved in or are you aware of pending litigation against you, your current company, or any past company concerning defective workmanship or mold claims?	☐	☐
If yes, describe. _____		

24. Describe any types of operations or projects that you have discontinued (i.e. no longer build, did not complete, etc.)

_____
_____
_____
_____

25. List the five largest projects undertaken by you in the past five years.

Description	Job Cost	Project Duration

26. List the three largest projects planned for the coming year.

Description	Est. Job Cost	Project Duration

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 must be reported to your agent.

_____
Signature of Applicant Title Date

_____
Signature of Producing Agent Date

_____
Agent Name and Address