



SUPPLEMENTAL CONTRACTORS QUESTIONNAIRE

Applicant's Instructions:

- Answer all questions. If the answer to any question is **NONE**, please state **NONE**.
- Questionnaire must be signed and dated by owner, partner or officer.
- PLEASE CAREFULLY READ THE STATEMENTS AT THE END OF THIS QUESTIONNAIRE.

THE TERM "WILL YOU" IN AN APPLICATION QUESTION MEANS UNTIL THE EXPIRATION DATE OF THE POLICY

1. Applicant: _____
2. Individual Incorporation Partnership LLC Other _____
3. Years in business for yourself: _____
4. Web-site/Email address: _____
5. List all business names which you have used in the past or are now using in addition to that for which you are currently applying for insurance:

6. Do you have operations other than contracting? Yes No
Covered by other insurance? Yes No
If "Yes" please explain: _____
7. Contractor's license #: _____ States in which you do business: _____
8. Has any licensing authority taken any action against you? Yes No
If "Yes" please explain: _____
9. Have you allowed or will you allow your license to be used by any other contractor? Yes No
If "Yes" please explain: _____
10. Estimates for next 12 months:
Total Payroll: \$ _____ Sub-Contracted Costs: \$ _____ Gross Receipts: \$ _____
Wrap Payroll: \$ _____ Non-Wrap Payroll: \$ _____
11. Do you do OCIP (Wrap-up) work ? Yes No
If "Yes", what are estimated receipts for:
Work covered separately under OCIP/Wrap-up? \$ _____
Estimated receipts for non-Wrap/OCIP? \$ _____

12. Prior Years History:

Yr: _____ Payroll: \$ _____ Sub-Contracted Costs: _____ Gross Receipts: \$ _____ Liability Ins. Premium: \$ _____
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13. Indicate the type and percentage of construction work performed by you over next 12 months:

<u>RESIDENTIAL</u> _____%	<u>COMMERCIAL</u> _____%
Residential new construction – Non-tract work _____%	Commercial new construction _____%
New Residential construction – Tract work _____%	Commercial structural remodel/repair _____%
Residential structural remodel/repair _____%	Commercial non-structural remodel/repair _____%
Residential non-structural remodel/repair _____%	Industrial new construction _____%
Other: _____%	Industrial structural remodel/repair _____%
	Industrial non-structural remodel/repair _____%
Total 100%	Total 100%

14. If tract work is done, please give maximum number of homes in the entire development: _____

15. Any work performed for a fee or with labor and/or material costs paid by others? Yes No
 If "Yes" please explain: _____

16. Using percentage of payroll (under *Direct*) and percentage of sub-contract costs (under *Subbed*), indicate the anticipated percentage of construction work you will perform over the next 12 months:

Type of Work	% Direct	% Subbed	Type of Work	% Direct	% Subbed	Type of Work	% Direct	% Subbed
Carpentry			Grading			Roofing		
Carpentry-Framing			Insulation			Seismic Retrofitting		
Concrete-Flatwork			Maintenance			Sewer		
Concrete-Foundations			Masonry			Steel/Structural		
Demolition			Mechanical			Steel/Ornamental		
Drilling			Painting			Street/Road		
Earthquake Repair			Plastering			Supervisory Only		
Electrical			Plumbing			Water/Gas Mains		
Excavation			Other (Describe):					

17. Describe the three largest projects, including the total cost, which you have performed during the past five years:

18. List current projects or those scheduled to commence over the next twelve months: (Attach separate sheet if necessary.)

Location	Type of work	Start Date	Ending Date	Cost of Project
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

19. Have you been involved or do you subcontract any work involving blasting operations, hazardous waste, asbestos, mold, PCB's, medical and/or industrial life support, oil fields, dams/levees or quarries, fuel tanks or pipe lines? Yes No

If "Yes" please explain: _____

20. Have you performed or will you or *your* subcontractors perform any work below grade? Yes No

Maximum depth: _____ % of operations: _____.

Any shoring, underpinning, cofferdam or caisson work? Yes No

If "Yes" please explain: _____

21. Do you perform installation or service of Fire Suppression Systems? Yes No

22. Have you worked or will you or your employees work under the U.S. Longshoremen's and Harbor Workers' Act or Jones Maritime Act? Yes No

23. If you use sub-contractors, complete the following:
a. Do you always collect certificates of insurance from sub-contractors? Yes No

b. What minimum General Liability limit is required? _____

c. Do you always require sub-contractors to name you as additional insured? Yes No

d. Do you have a standard formal written contract with subcontractors? Yes No

e. If yes, does it have a hold harmless/indemnification agreement in your favor? Yes No

24. Will any of your work involve the construction of, or be for, condominiums or townhouses? Yes No

If yes, is the work new construction? Yes No

Repair only homeowner associations? Yes No

Repair only for individual unit owners only? Yes No

25. Have you or will you ever convert apartments to condominiums? Yes No

26. Do you or will you perform/ed work above 30 feet in height? Yes No

If "Yes" please explain: _____

27. Do you or will you perform/ed work on hillsides Yes No

If "Yes", what is the maximum degree of slope you will work on? _____.

28. During the past three years, has any insurer ever cancelled, declined or refused to issue similar insurance to you or has any finance company cancelled you for non-payment of premium? Yes No

If "Yes" please explain: _____

29. Has any lawsuit ever been filed, or any claim otherwise been made against your company or any partnership or joint venture of which you have been a member or your company's predecessors in business, or against any person, company or entities on whose behalf your company has assumed liability? Yes No

(For the purpose of this application, a claim means a receipt of a demand for money, services or arbitration.)

If "Yes" please explain: _____

30. Is your company aware of any facts, circumstances, incidents, situations, damages or accidents (including but not limited to: faulty or defective workmanship, product failure, construction dispute, property damage or construction worker injury) that a reasonably prudent person might expect to give rise to a claim or lawsuit, whether valid or not, which might directly or indirectly involve the company? Yes No
If "Yes" please explain: _____
31. Will you or have you ever included Chinese manufactured drywall in any project? Yes No
If "Yes" please explain: _____

PLEASE CAREFULLY READ THIS STATEMENT

The undersigned Applicant warrants that the above statements and particulars, together with any attached or appended documents or materials ("this Application"), are true and complete and do not misrepresent, misstate or omit any material facts. Furthermore, the Applicant authorizes the Company, as administrative and servicing manager, to make any investigation and inquiry in connection with the Application as it may deem necessary.

The Applicant agrees to notify the Company of any material changes in the answers to the questions on this Application which may arise prior to the effective date of any policy issued pursuant to this Application and the Applicant understands that any outstanding quotations may be modified or withdrawn based upon such changes at the sole discretion of the Company.

Notwithstanding any of the foregoing, the Applicant understands the Company is not obligated nor under any duty to issue a policy of insurance based upon this Application. The Applicant further understands that, if a policy is issued, this Application will be incorporated into and form a part of such policy.

Signature of Applicant: * _____

Title (Owner, Officer, Partner): _____

Date: _____

SIGNING THIS QUESTIONNAIRE DOES NOT BIND THE APPLICANT OR THE INSURER OR THE ADMINISTRATIVE AND SERVICING MANAGER TO COMPLETE THE INSURANCE.

* Must be signed by the owner, executive officer or partner of the company.