

General Contractor/Artisan Contractor)

(Include Acord Application)

Applicant's Name: Mailing Address:				Address:	
Mailin	0		_		
License	business: d?	Years of experience: Year of license: other other state?	License	e #: Kind (of License:
1.	Are there any other opera	tions owned, operated, or ma	anaged by you?	🗆 Yes 🗆 No	
	Please explain:				
	Is coverage in place elsew	where for these operations?		🗆 Yes 🗆 No	
2.	Does any of your constru- directly under your contro	ction management work invo bl?	olve supervision	of subs whose contracts a	
	Please explain:				
3.	Radius of operations from	main location:		States worked in:	
4.	Payroll of employees other	, and partners active at job s er than owners, officers, part , staffing service, casual lab	ners, and clerica	1	\$ \$ \$
5.	Do you employ any licent	sed architects, surveyors, en	gineers, Real Est	ate agents or brokers?	🗆 Yes 🗆 No
6.	Do you have any prior or	planned jobs covered under	"wrap-up" or O	CP policies?	🗆 Yes 🗆 No
	Explain:				
7.		rk you have done or plan to Commercial% Other (explain)%	Public Works		%
Comme	ercial: New% o	or Remodel%	Residential	: New% or R	emodel %
Industria			% Apartments		%
Instituti				ims/Townhouses	%
Mercant	tile		6 Custom Hor		%
Office	1. 0 1		6 Tract Home		%
	eling – Structural			<u>s</u> – Structural	%
Other:	eling – Nonstructural		% Remodeling% Other:	g – Nonstructural	%
	ou ever been or are current	y involved in any residentia		ng six (6) homes/units?	
		<u> </u>	1		



8. <u>SUBCONTRACTORS</u>

Do you obtain Certificates of Insurance for GL and WC from all subcontractors?	🗆 Yes 🗆 No	
What are the minimum General Liability limits you require?		
Are written contracts obtained from all subcontractors?	🗆 Yes 🗆 No	
Do all contracts contain a Hold Harmless clause in your favor?	🗆 Yes 🗆 No	
Are you named as an Additional Insured on all subcontractor policies?	🗆 Yes 🗆 No	
Do you normally use the same subcontractors?	🗆 Yes 🗆 No	
Do you use any casual labor?	🗆 Yes 🗆 No	
Do you use any leased employees? If yes, provide copy of contract.	🗆 Yes 🗆 No	
Are you responsible for providing benefits, Worker's Compensation for these employees?	🗆 Yes 🗆 No	
What percentage of your work do you sub out?		%
Do you carry Worker's Compensation insurance?	🗆 Yes 🗆 No	

9. Please provide your gross sales for each of the 5 past years and an estimate for the next 12 months:

Year	Payroll	Receipts	Subcontractors Cost
5 th prior year			
4 th prior year			
3 rd prior year			
2 nd prior year			
Last year			
Projected next 12 months			

10. Describe your three largest projects currently underway or planned for the next year, including values:

Start Date	End Date	Value	Description
		\$	
		\$	
		\$	

11. Describe your four largest projects over the past five years, including values:

Year Completed	Value	Description
	\$	
	\$	
	\$	
	\$	
	\$	

12. 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 other List equipment: Attach a copy of the contract.				No	If yes, sales/receipts:		
15.	Do you lease mobile equipment? Type of equipment:			6 🗆	No	With operators? \Box Yes	🗆 No	
	Do you use cranes?		□ Ye	s 🗆	No	Maximum length of boom	ı:	
16.	Do you or have you performed repair	rs of fii	re dama	ge, w	ater	damage, or mold damage? 🛛 Yes	🗆 No	
17.	Do you use explosives? If yes, please explain:		□ Ye					
18.	Any flammables stored on site? If yes, please explain:						□ Yes □	No
19.	Have you done or do you plan any w Refineries Chemical Plants Railroads Public Utilities Please explain:	Yes Yes Yes Yes	 No No No No 			Gas StationsYesNoAirportsYesNoHospitalsYesNo		
20.	Have you done or do you plan any pro- Caissons Caissons C	Yes Yes Yes	 No No No 	-		Piers Shoring Other structural engineering?	YesYesYes	🗆 No
21.	Have you in the past or do you plan a Percentage:% V Please explain:	What is	the ma	ximu	m he	ight?	🗆 No	
22.	Have you in the past or do you plan a Percentage:% V Please explain:	What is	the ma	ximu	m de	pth?	🗆 No	
23.	Have you in the past or do you plan a Maximum degree of slope:		rk on h	illside	es, hil	ltops, slopes, or landfills? □ Yes	🗆 No	
24.	Have you in the past or do you plan a Percentage of heat applications: Please explain:		_%	Pe	rcent	age of membrane roofing:		
25.	In the past three years, have you been	n fired	or repla	ced o	on a jo	bb in progress?	□ Yes	🗆 No
	Have you replaced another contracto Please explain:						□ Yes	🗆 No
	Were there any claims, losses, or suit	ts agair	ıst you	in the	past	five years?	□ Yes	🗆 No
	Are there any claims or legal actions	pendir	ng agair	ist ang	y of t	he entities named in the application?	□ Yes	🗆 No



Do any of the entities named in the application have knowledge of any pre-existing act, omission, event, condition, or damage to any person or property that may potentially give rise to any future claim or legal action?

	□ Yes	🗆 No
Have you been accused of faulty construction in the past five years?	□ Yes	🗆 No
Have you been accused of breaching a contract in the past five 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	\$ %	\$ %	

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. This application does not bind any of the parties to complete the insurance transaction.

Applicant's Signature

Producer's Signature

Date