

Contractors' Supplemental Questionnaire

1. Applicant's Name: _____
2. Business Address: _____
3. Years In Business Under Current Name: _____
4. List all Previous Business Names: _____

5. Contractors License Number: _____
6. States In Which You Are Licensed To Do Business: _____
7. Percentage of Work performed as a a) General Contractor _____
b) Sub Contractor _____
8. Percentage of Work that is a) Commercial _____
b) Residential _____
c) Industrial _____
d) Other (describe) _____
9. Percentage of Work that is a) New Construction _____
b) Remodel/Repair _____
10. Estimates for next 12 months:
Payroll: \$ _____ Sub-Contract Costs: \$ _____ Sales: \$ _____
11. Indicate the anticipated percentage of construction work over the next 12 months to be performed by you and by sub contractors:

	Direct	Subbed		Direct	Subbed		Direct	Subbed
Blasting	_____ %	_____ %	Excavation	_____ %	_____ %	Seismic Retro-Fitting	_____ %	_____ %
Bridge Bldg.	_____ %	_____ %	Grading	_____ %	_____ %	Sewer	_____ %	_____ %
Carpentry	_____ %	_____ %	Insulation	_____ %	_____ %	Steel (Structural)	_____ %	_____ %
Concrete	_____ %	_____ %	Masonry	_____ %	_____ %	Steel (Ornamental)	_____ %	_____ %
Demolition	_____ %	_____ %	painting	_____ %	_____ %	Street/Road	_____ %	_____ %
Drilling	_____ %	_____ %	Plastering	_____ %	_____ %	supervisory	_____ %	_____ %
Earthquake Rep	_____ %	_____ %	Plumbing	_____ %	_____ %	Water/Gas Mains	_____ %	_____ %
Electrical	_____ %	_____ %	Roofing	_____ %	_____ %	Landscaping	_____ %	_____ %

12. Do any of your operations involve:
 - Asbestos Removal? Yes ___ No ___ Pile Driving? Yes ___ No ___ Blasting? Yes ___ No ___
 - Shoring or Underpinning? Yes ___ No ___ Demolition? Yes ___ No ___

13. Do you now, or have you ever built on hillsides, slopes, landfills, or other terrains susceptible to subsidence? Yes ___ No ___
 If so, please describe:

14. Do you draw any plans or blueprints used in your construction work? Yes ___ No ___
 If so, please describe:

15. If you are a roofing contractor or otherwise performing roofing work, what percentage of operations are :

Hot Tar? _____% Foam Application? _____% Torchdown? _____%
 Excess four (4) stories? _____% N/A _____

Controlling the Subcontractors Exposure

If you NEVER hire subcontractors please check here ___ and skip to next section-Historical

1. Do you always require your subcontractors to sign a hold-harmless or indemnification agreement in your favor? Yes ___ No ___
2. Do you utilize a standard contract with all you subcontractors? Yes ___ No ___
3. a) Do you require your subcontractors to carry General (Public) Liability Insurance? Yes ___ No ___
 b) Do you require that you are named as an Additional Insured on their policies? Yes ___ No ___
 c) What limit of liability do you require your subcontractors to carry? _____
 d) Do you request certificates of insurance from subcontractors in order to verify compliance with items 3a, 3b, and 3c above. Yes ___ No ___
4. a) Do you require your subcontractors to carry worker's compensation insurance? Yes ___ No ___
 b) Do you request certificates of insurance from them to verify compliance? Yes ___ No ___

Historical Premium Basis

1. Please complete the following chart

POLICY YEAR	GROSS RECEIPTS	PAYROLL	SUBCONTRACTED COST
Current Policy Term	_____	_____	_____
First Prior Term	_____	_____	_____
Second Prior Term	_____	_____	_____
Third Prior Term	_____	_____	_____
Fourth Prior Term	_____	_____	_____
Fifth Prior Term	_____	_____	_____

2. Please describe the five largest projects undertaken by you in the past five years:

	DESCRIPTION	JOB COST	PROJECT DURATION
a)	_____	_____	_____
b)	_____	_____	_____
c)	_____	_____	_____
d)	_____	_____	_____
e)	_____	_____	_____

3. Please describe the three largest projects planned for the upcoming year:

	DESCRIPTION	ESTIMATED TOTAL COST	ESTIMATED PROJECT DURATION
a)	_____	_____	_____
b)	_____	_____	_____
c)	_____	_____	_____

4. What is the average dollar value of a completed project? _____

5. Please describe any types of projects that you have discontinued (i.e. no longer build):

SUPPLEMENTAL INFORMATION

1. Are you involved in any other business besides contracting? If so please describe: _____

2. Have you been involved in or are you aware of pending litigation concerning defective workmanship? Yes _____ No _____. If so please describe:

3. In the past ten years, present policy period or upcoming policy period, has or will any of your work involve new construction activities for multi-unit residential projects including condominiums, townhouses, tract home subdivisions or master planned residential communities? Yes _____ No _____

The undersigned applicant warrants that the above statements and particulars together with any attached or appended documents are true and complete and do not misrepresent, misstate or omit any material facts.

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

Notwithstanding any of the foregoing, the applicant understands that we are not obligated or under any duty to issue a policy of insurance based upon this information. The applicant further understands that if a policy of insurance is issued, this questionnaire will be incorporated into and form a part of such policy.

Signature of applicant: _____

Title (Officer, Partner) _____

Date: _____

Signing this questionnaire does not bind the applicant or the insurer or the underwriting manager to provide the insurance.