



AllSteel Contractors Supplemental Application

Please complete all questions in full.

GENERAL INFORMATION

Applicant: _____

Website: _____

Years in business under current name: _____

Describe your operations: _____

Do you have any other operations active or inactive? Yes No

If yes, please explain: _____

Contractor's license number: _____ States in which you do business: _____

New York State Applicants: Do you do any work in the five boroughs of New York? Yes No

List all other business names & licenses active or inactive applicant has used in the past 10 years:

What were the operations? _____

Have you allowed or will you allow your license to be used by any other contractor for a project on which you have worked? Yes No

Has any other licensing authority taken any action against you? Yes No

Does applicant currently own/operate any other business? Yes No

If yes, need name and percentage of ownership: _____

What are the operations? _____

Percentage of current operations: General Contractor _____% Subcontractor _____% Construction Manager _____%

Estimates for the next 12 months:

Payroll: \$_____ Sub-Contract Cost: \$_____ Gross Receipts: \$_____

Historical Exposures	Gross Receipts	Payroll	Sub-Contract Costs
1 st Year	\$	\$	\$
2 nd Year	\$	\$	\$
3 rd Year	\$	\$	\$
4 th Year	\$	\$	\$

Indicate the percentage of construction work performed by you: (MUST TOTAL 100%)

Residential _____% Commercial _____%

New Construction: _____% New Construction: _____%

Remodeling/Repair: _____% Remodeling/Repair: _____%

Other: _____%

OPERATIONS

How many new homes will you build from the ground up in the next year? _____

Have you ever built a home from the ground up? Yes No

If yes, how long ago? _____ How many? _____

Have you built or will you build on hillsides, terraces, landfills or Subsidence areas? Yes No

If yes, please explain: _____

Have you been involved or will you be involved with blasting operations or any other hazardous work activity? Yes No

If yes, please explain: _____

Do you perform synthetic stucco work (EIFS)? Yes No

Do any of your subcontractors perform EIFS work? Yes No

Have you built/demolished or will you build/demolish buildings or other structures in excess of four (4) stores? Yes No

If yes, please explain: _____

Do you perform work above two stories in height (other than interior remodel)? Yes No

If yes, what percentage? _____% Maximum Height? _____

Do you use scaffolding? Yes No

Please describe: _____

Do you perform any work at Airports? Yes No

If yes, please explain: _____

Do you own, rent or subcontract any cranes? Yes No

If yes, please explain: _____

Have you been involved or will you or your subcontractors be involved in any removal or asbestos, PCB's or other hazardous materials? Yes No

Removal or work on fuel tanks or pipelines? Yes No

Do you perform any Mold Remediation Work? Yes No

Do any of your subcontractors perform Mold Remediation Work? Yes No

If yes, is coverage in place? Yes No

Name of Carrier? _____

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

Maximum depth: _____% % of operations: _____

Do you perform any shoring, underpinning, cofferdam or caisson work? Yes No

If yes, please explain: _____

Will any work involve the construction of or involvement with condominiums or townhouses? Yes No

If yes, what percentage of total operation? _____%

New construction? What percentage? _____%

Repair or remodel only? What percentage? _____%

Have you ever worked in new condominiums/townhouses?	Yes	No
If yes, how long ago? _____		
Will any work involve the construction of or involvement with apartments?	Yes	No
If yes, what percentage of total operation? _____%		
New construction? What percentage? _____%		
Repair or remodel only? What percentage? _____%		
How many units in the entire project? _____		
Have you ever worked in new apartments?	Yes	No
If yes, how long ago? _____ How many units in the entire building? _____		
Have you or will you ever convert apartments to condominiums?	Yes	No
Will any work involve the construction of or involvement with new duplexes, triplexes, fourplexes or patio homes?	Yes	No
Have you ever worked in new duplexes, triplexes, fourplexes or patio homes?	Yes	No
If yes, how long ago? _____		
Will you be working in any new tracts?	Yes	No
If yes, what is the maximum number of homes in ENTIRE tract? _____		
What percentage? _____%		
Have you ever worked in new tract developments?	Yes	No
If yes, how long ago? _____ How many units in the entire development? _____		
Have you ever worked in new assisted living facilities?	Yes	No
If yes, how long ago? _____ How many units in the entire building? _____		
Any current Wrap-Up/OCIP Projects?	Yes	No
Name of Carrier: _____		

CLAIMS

Are there any claims or legal actions pending against and of the entities?	Yes	No
Do any of the entities named in the application have knowledge of any pre-existing act, omission, event, condition or damages to any person or property that may potentially give rise to any future claim or legal action against them?	Yes	No
Have you been accused of faulty construction in the past five (5) years?	Yes	No
Have you been accused of breaching a contract in the past five (5) years?	Yes	No
Have you ever filed any Mechanic Leins in the past five (5) years?	Yes	No

Please provide estimated breakdown of annual gross receipts and payroll for the following categories:

Description	Annual Gross Payroll	Annual Gross Sales
Steel Erection – Structural		
Steel Erection – Non-Structural		
Rigging if done as a complete and separate operation from any of the above		
Steel Fabrication – Structural		
Steel Fabrication – Non-Structural		
Other (Please Specify)		
TOTAL		

Does your operation include work for any of the following:

Welding If yes, please explain: _____	Yes	No
More than 5% of road and/or bridge job sites If yes, please explain: _____	Yes	No
USL & H exposure If yes, please explain: _____	Yes	No
Hot power line or utility work If yes, please explain: _____	Yes	No
Demolition If yes, please explain: _____	Yes	No
Manbaskets/personal buckets If yes, please explain: _____	Yes	No
Any work in oil fields If yes, please explain: _____	Yes	No
Any work for a gas company near explosive materials If yes, please explain: _____	Yes	No
Work within 50 feet of explosive materials If yes, please explain: _____	Yes	No

If cranes are used, please answer the following:

Do you own cranes?	Yes	No
If yes, do you lease/rent your cranes to others?	Yes	No
With or without operators? _____		
Are Certificates of Insurance required from lessees on rentals?	Yes	No
What coverages and limits do you require? _____		
Do you require to be added as Additional Insured?	Yes	No
Are cranes certified annually?	Yes	No
If yes, by whom? _____		

What kinds of goods/equipment are typically lifted by cranes used in operations? _____

Do you have a minimum age for operators?	Yes	No
If yes, what age? _____		
Do you have an employee training program?	Yes	No
If yes, please describe: _____		
Do you have a written maintenance program? If, yes, please attach a copy.	Yes	No
Do you have a written form for crane inspections which is used?	Yes	No

DEFINITIONS

EIFS -Exterior Insulation Finishing Systems – means an exterior cladding or finish system used on any part of any structure and consisting of: a) a rigid or semi-rigid insulation board made of expanded polystyrene or other materials; and b) an adhesive and/or mechanical fasteners used to attach the insulation board to the substrate; and c) a reinforced basecoat; and d) a finish coat providing surface texture and color.

GENERAL CONTRACTOR – A contractor, who exercises primary control of the job site, typically subcontracts a significant portion of the work, and/or is named in the construction documents as the general contractor of record.

RESIDENTIAL CONTRACTOR – Single or multi-unit family housing, including apartments, condominiums and townhouses, planned unit developments and tract housing or similar planned communities.

SUBSIDENCE – Any movement of the land or earth including landslides, mudflow, earth sinking, rising and shifting, collapse or movement of fill, earth settling, slipping, falling away, caving in, eroding or tilting and earthquake.

TORCH APPLIED ROOFING (MODIFIED BITUMEN) – This process which is also called torch welding, involves a modified bitumen installed on a roofing deck by means of a torch. A membrane is laid on the roof, heated by a torch and allowed to cool so that the material solidifies in place. The asphalt component in the membrane serves as an adhesive between the surface material and roof substrate.

MODIFIED BITUMEN – Also called “modbit” membranes consist of an asphalt and polymer blend which allow the asphalt to take on characteristics of the polymer.

HOT AIR WELDING – Hot Air Welding is a system utilizing a heating source (either electric or propane flame) attached to a hose, which blows hot air onto the membrane.

TRACT HOUSING – Developments where the houses are similar in price, physical characteristics, lot size and square footage; numerous houses of similar or complementary design constructed on a given expense of land, by a single builder.

WRAP-UP (OCIP/CCIP) – A policy providing coverage(s) for all interests in a major construction project. Also know as an OCIP (Owner Controlled Insurance Program) or a CCIP (Contractor Controlled Insurance Program).

Please attach:

- A list of equipment with values
- Financial Statement
- Copy of rental contracts or work agreements, including bare rental contract, if applicable
- Loss Control/Safety Program
- Hiring Procedures

WARRANTY: The purpose of this Supplemental Application is to assist in the underwriting process. Information contained herein is specifically relied upon in determination of the applicant's insurability. Material misstatements or errors made on this form may provide a basis for the company's rescission of the policy at any time during the term of the policy, with the return of unearned premium. The undersigned, therefore, warrants that the information contained herein is true and accurate to the best of his knowledge, information and belief. The Supplemental Application shall be the basis of any insurance policy that may be issued.

I understand that underwriters shall rely upon the information contained in this supplemental application form to determine the acceptability, rates and coverages proposed. The information contained in this form is accurate and true.

Signature of Applicant: _____

Name & Title: _____ Date: _____

*Signature must be of owner, executive officer or partner of company