

Contractors Supplemental Application

Please complete all question	ns in full.					
GENERAL INFORMATION						
Applicant:						
Website:						
Years in business under cur	rent name:					
Describe your operations: _						
Do you have any other oper	ations active or inactive?			OYes ONo		
If yes, please expl	ain:					
Contractor's license number	er:	States in which yo	u do business:			
New York State App	olicants: Do you do any work i	n the five boroughs of Ne	w York?	OYes ONo		
List all other business name	s & licenses active or inactive	applicant has used in the	e past 10 years:			
NA/In advisors Alice and						
	erations?					
worked?	allow your license to be used	d by any other contractor	for a project on whi	•		
	nority taken any action agains	t vou?		O Yes ONo		
rias any other licensing auti	ionty taken any action against	t you!		○Yes ○No		
Does applicant currently own	n/operate any other business'	?		○Yes ○No		
If yes, need name a	nd percentage of ownership:					
What are the operat	ions?					
Percentage of current opera	tions: General Contractor	% Subcontractor	% Construction	Manager%		
Estimates for the next 12 mg	onths:					
Payroll: \$	Sub-Contract Cost: \$_	Gross Re	ceipts: \$			
Historical Exposures	Gross Receipts	Dovroll	Sub Con	tract Costs		
Historical Exposures	•	Payroll		liaci Cosis		
1 st Year	\$	\$	\$			
2 nd Year	\$	\$	\$			
3 rd Year	\$	\$	\$			
4 th Year	\$	\$	\$			
Indicate the percentage of co	onstruction work performed by	y you: (MUST TOTAL 10	J%)			
Residential _	% <u>Commer</u>					
New Construction: _	% New Cor	nstruction:%				
Remodeling/Repair:	% Remode	ling/Repair:%				
Other:		%				

SUBCONTRACTORS If yes, please complete the following: Do you use Subcontractors? Percentage of subcontracted work: _____% Annual subcontracting cost (including all of subs' labor and materials): \$ O Yes O No Do you collect certificates from all subcontractors? What limit is required from these subcontractors? \$ Do you used a standard contract with your subcontractors? Yes No O Yes O No Does it contain Hold Harmless and Indemnification wording to protect you? Does it require subcontractors to include you as an Additional Insured on their policy? O Yes O No Using percentage of payroll (under Direct) and percentage of contact costs (under Subbed), indicate the anticipated percentage of construction work you will perform over the next 12 months: Type of Work % Direct % Type of Work % % Type of Work % % Subbed Direct Subbed Subbed Direct Airport Runways Excavation Roofing Blasting **HVAC** Seismic/Retrofitting Bridge Building Grading Sewer Carpentry Insulation Steel/Structural Steel/Ornamental Concrete Maintenance Demolition Street/Road Masonry Drilling Mechanical Supervisory Only Drywall Painting Traffic Signals Earthquake Plastering Water/Gas Mains Electrical Plumbing Other Describe your four largest projects over the past five years, including values: <u>S</u> D D

ist current project currently underway or planned for the next year, including v	values:
SAFETY	
o you have a formal safety program in place?	○Yes ○No
Ooes your safety program contain the following procedures:	
Safety Rule & Requirements?	○Yes ○No
Subcontractor responsibilities?	○Yes ○No
Regular Safety Meetings?	○Yes ○No
Site Safety Inspections?	○Yes ○No
Non-compliance Notice?	○Yes ○No
Accident Reporting system?	OYes ○No
Safe Hiring Procedures?	○Yes ○No

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?	OYes ○No
If yes, how long ago? How many?	
Have you built or will you build on hillsides, terraces, landfills or Subsidence areas?	OYes ○No
If yes, please explain:	
Have you been involved or will you be involved with blasting operations or	
any other hazardous work activity?	OYes ○No
If yes, please explain:	
Do you perform synthetic stucco work (EIFS)?	OYes ○No
Do any of your subcontractors perform EIFS work?	OYes ○No
Have you built/demolished or will you build/demolish buildings	
or other structures in excess of four (4) stores?	OYes ○No
If yes, please explain:	
Do you perform work above two stories in height (other than interior remodel)?	OYes ○No
If yes, what percentage?% Maximum Height?	
Do you use scaffolding? O Yes O No	
Please describe:	
Do you perform any work at Airports?	OYes ○No
If yes, please explain:	
Do you own, rent or subcontract any cranes?	OYes ○No
If yes, please explain:	
Have you been involved or will you or your subcontractors be involved in any removal or asbestos, PC	CB's or other
hazardous materials?	OYes ○No
Removal or work on fuel tanks or pipelines?	OYes ○No
Do you perform any Mold Remediation Work?	OYes ○No
Do any of your subcontractors perform Mold Remediation Work?	OYes ○No
If yes, is coverage in place?	OYes ○No
Name of Carrier?	
Have you performed or will you or your subcontractors perform any work below grade?	OYes ○No
Maximum depth:% % of operations:	
Do you perform any shoring, underpinning, cofferdam or caisson work?	OYes ○No
If yes, please explain:	
	_
Will any work involve the construction of or involvement with condominiums or townhouses?	OYes ONo
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?					
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?	OYes	○No			
If yes, how long ago? How many units in the entire building?					
Have you or will you ever convert apartments to condominiums?	OYes	ONo			
Will any work involve the construction of or involvement with new duplexes, triplexes, fourplexes or patio	homes? OYes	○No			
Have you ever worked in new duplexes, triplexes, fourplexes or patio homes? If yes, how long ago?	OYes	○No			
Will you be working in any new tracts? If yes, what is the maximum number of homes in ENTIRE tract? What percentage?%	○Yes	ONo			
Have you ever worked in new tract developments? If yes, how long ago? How many units in the entire development?	○Yes	○No			
Have you ever worked in new assisted living facilities? If yes, how long ago? How many units in the entire building?	○Yes	○No			
Any current Wrap-Up/OCIP Projects? Name of Carrier:	OYes	○No			
<u>CLAIMS</u>					
Are there any claims or legal actions pending against and of the entities? Do any of the entities named in the application have knowledge of any pre-existing act, omission, event, or	OYes	_			
damages to any person or property that may potentially give rise to any future claim or legal action agains		Oi			
Have you been accused of faulty construction in the past five (5) years?	○Yes ○Yes	ON₀			
Have you been accused of breaching a contract in the past five (5) years? Have you ever filed any Mechanic Leins in the past five (5) years?	OYes	_			
Trave you ever med any intechanic Lenis in the past live (3) years?	○ Yes	ON₀			

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 expended 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).

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 an 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 ur	derstand that	underw	/riters	shall rely u	pon the info	ormatio	n contained i	n this supp	leme	ental	applic	catio	on form to	dete	rmine
the	acceptability,	rates	and	coverages	proposed.	The	information	contained	in	this	form	is	accurate	and	true.
Sig	nature of Appli	cant: _													

Date:

Name & Title:

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