

- Western World Insurance Company
- Tudor Insurance Company
- Stratford Insurance Company

Application For General Contractors

1. Business Name _____
 Street Address _____
 City _____ State _____ Zip _____
 Web Site Address _____

Structure of Organization: Corporation Partnership Sole Proprietorship LLC

Attach a complete list of name insureds including a brief description of each.

Does the applicant operate as a: General Contractor Project Manager Project Owner
 Builder/Developer Construction Manager

If any work as a Project Manager, Developer, or Construction Manager please describe: _____

If any work as a Project or Construction Manager does applicant carry an E & O policy? Yes No
 If yes, describe: _____

Percent of your work as a General Contractor? _____ % As a Subcontractor? _____ %
 As a Developer? _____ % Construction Manager? _____ %

2. Year(s) in business under this name: _____ Time at this address: _____

3. Year(s) of experience in this field: _____ License class/number: _____

4. Do you allow your license to be used by others to obtain a permit without your supervision Yes No on the job site?

5. Area of operations (county/state): _____

6. Any owned Real Estate development property? Yes No If yes, # of acres _____ # of Bldg sites _____
 What is planned to be developed on this site? _____

7. Limits of Liability requested \$ _____ Occurrence / \$ _____ Aggregate
 What Workers Compensation requirements do you require of your subcontractors? _____

8. Receipts expected during coming policy period: \$ _____
 Receipts past 4 years: \$ _____ \$ _____ \$ _____ \$ _____

9. Payroll of active owners (except those exclusively in clerical or sales): \$ _____

10. Number of employees (including leased) in the following classes:
 Field Supervisors: _____ Trades _____ Laborers _____ Clean-up _____

ISO Classification and Code	Payroll	ISO Classification and Code	Payroll
a)		d)	
b)		e)	
c)		f)	

Provide a list of trades performed by the named insured: _____
 What is the cost and number of any leased workers? \$ _____ Cost _____ Number _____
 What is the cost and number of casual laborers used? \$ _____ Cost _____ Number _____

11. Annual subcontracted cost (labor and material): \$ _____
 (Include cost of all material provided by you, a sub, an owner or a bank.)

12. Does applicant normally employ the same subcontractors? Yes No
 Provide a list of major subcontractors used. (Attach page if more space is needed.) _____

13. Do **all** subs provide Certificates of Insurance? Yes No
 Limits required of your subcontractors: \$ _____ Occurrence \$ _____ Aggregate
 Is the applicant an Additional Insured on all subcontractor's policies? Yes No
 Do **all** subcontractors "Hold you harmless"? Yes No
 Does the applicant keep copies of all certificates? Yes No
 How long are they kept? _____
 Explain any "No" responses to question 13. _____

Attach sample copy of agreements with subcontractors (subcontractor agreements, additional insured's and their interest and any hold harmless wording).

14. Show percent of work performed in: (each row should equal 100%)

Residential:	% New Construction _____ + % Remodeling / Repairs _____ + % Demolition _____ = 100 %
	% Rural _____ + % Suburban _____ + % Urban _____ = 100%
Commercial:	% New Construction _____ + % Remodeling / Repairs _____ + % Demolition _____ = 100 %
	% Rural _____ + % Suburban _____ + % Urban _____ = 100%
Industrial:	% New Construction _____ + % Remodeling / Repairs _____ + % Demolition _____ = 100 %
	% Rural _____ + % Suburban _____ + % Urban _____ = 100%

15. Do you loan, lease or rent equipment to others? Yes No
 If yes, what type of equipment _____
 With or without operator? _____
 Rental Receipts with operator \$ _____ Rental Receipts without operator \$ _____

16. Have you built or are you building on hillsides, hilltops, coastal areas, flat pads in flat areas, landfills, in subsidence areas, or in flood zones? Yes No
 If yes, describe _____

17. Have you built, are you building or remodeling any condominiums, town houses or tract homes? Yes No
 If yes, describe _____

18. Number of residential homes anticipated to be constructed over the next year? _____
 Indicate the number of residential homes or condos built over the past three (3) years. _____
 Indicate the number of condos remodeled in the past three (3) years. _____

19. Are you currently working or have you ever worked in the state of New York? Yes No
 If yes, please provide details on the job or jobs. _____

20. Do you have any future plans or would you consider working in the state of New York? Yes No
 If yes, please provide details on the job or jobs. _____

21. Describe the largest jobs completed in the last 10 years. **(Attach a separate sheet if needed)**

	<u>Project/Location</u>	<u>Nature of Work</u>	<u>Receipts</u>	<u>Dates - Start/End</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____
8.	_____	_____	_____	_____
9.	_____	_____	_____	_____
10.	_____	_____	_____	_____

22. Describe jobs in progress: **(Attach a separate sheet if needed)**

	<u>Project/Location</u>	<u>Nature of Work</u>	<u>Receipts</u>	<u>Dates - Start/End</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

23. Describe jobs scheduled to begin in coming policy term. **(Attach a separate sheet if needed)**

	<u>Project/Location</u>	<u>Nature of Work</u>	<u>Receipts</u>	<u>Dates - Start/End</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

24. Do you provide watchmen or security for job site(s)? Yes No Are sites fenced? Yes No

Describe your formal safety program or attach copy: _____

25. Are A.I.A. Standard Contracts used? Yes No
 If no, attach sample copy of contract.

26. Do you or your subcontractors frame residential dwellings? Yes No
 If yes, indicate the number per year _____

27. If excavating, do you use "Dig Safe" or a similar method of contacting utilities prior to digging? Yes No

28. Indicate work done:	<u>By You or Employees</u>	<u>By Subs</u>	<u>Not Done</u>	<u>By You or Employees</u>	<u>By Subs</u>	<u>Not Done</u>
1. Airports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	22. Mold Remediation	<input type="checkbox"/>	<input type="checkbox"/>
2. Architecture/Design	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	23. Nuclear	<input type="checkbox"/>	<input type="checkbox"/>
3. Asbestos	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	24. Painting	<input type="checkbox"/>	<input type="checkbox"/>
4. Blasting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	25. Plastering	<input type="checkbox"/>	<input type="checkbox"/>
5. Boilers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	26. Plumbing	<input type="checkbox"/>	<input type="checkbox"/>
6. Bridges	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	27. Process Piping	<input type="checkbox"/>	<input type="checkbox"/>
7. Carpentry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	28. Radon	<input type="checkbox"/>	<input type="checkbox"/>
8. Concrete	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	29. Railroads	<input type="checkbox"/>	<input type="checkbox"/>
9. Cranes/Hoists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30. Roofing	<input type="checkbox"/>	<input type="checkbox"/>
10. Dams/Reservoirs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	31. Re-Roofing	<input type="checkbox"/>	<input type="checkbox"/>
11. Demolition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	32. Sewer	<input type="checkbox"/>	<input type="checkbox"/>
12. Electrical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	33. Sprinklers or Fire Prevention	<input type="checkbox"/>	<input type="checkbox"/>
13. Excavation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	34. Synthetic Stucco (EFIS)	<input type="checkbox"/>	<input type="checkbox"/>
14. Fireproofing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	35. Stucco	<input type="checkbox"/>	<input type="checkbox"/>
15. Fire or Water Restoration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	36. Street/Road	<input type="checkbox"/>	<input type="checkbox"/>
16. Grading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	37. Tunneling	<input type="checkbox"/>	<input type="checkbox"/>
17. Highways/Roads	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	38. Utilities	<input type="checkbox"/>	<input type="checkbox"/>
18. Insulation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	39. Welding at job sites	<input type="checkbox"/>	<input type="checkbox"/>
19. Joint Venture	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	40. Work over 3 stories	<input type="checkbox"/>	<input type="checkbox"/>
20. Lead Abatement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	41. Wrap-ups	<input type="checkbox"/>	<input type="checkbox"/>
21. Masonry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

Describe work done in detail (attach separate sheets if needed) _____

29. Loss History for the past five (5) years: (Please include currently valued, company issued loss runs)

	<u>Policy Year</u>	<u># of Claims</u>	<u>Losses (Open/Closed)</u>	<u>Details of Losses</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

30. Of the above, how many involved litigation/lawsuits _____

Has the applicant been accused of faulty construction or had similar allegations made, which did not lead to a claim. Yes No
 If yes, explain: _____

31. Expiring Carrier Information (past five (5) years):

	<u>Carrier</u>	<u>Limit</u>	<u>SIR/Deductible</u>	<u>Premium</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

32. Loss Control:

- 1. Does the applicant test all land, even if partially developed, before purchasing for development?
Or, does the applicant only rely on the soils tests supplied by the seller? Yes No
- 2. Does the applicant have a soil engineer on staff?
If no, is an independent soil engineer contracted? Yes No
Does the soil engineer hold the applicant harmless and name it as an additional insured? Yes No
- 3. Does the applicant employ an independent inspector that inspects each phase of construction?
If yes, what is the name of the inspection company/companies? Yes No
- 4. During the past three (3) years, has any company ever cancelled, declined, or refused to issue similar insurance to the applicant? Yes No
If yes, please provide details: _____

33. Management/Quality Control:

- 1. Please attach a copy of the applicant's quality control program.
- 2. What is your construction experience and that of your key personnel? (attach resume(s), if available):

<u>Name</u>	<u>Age</u>	<u>Position</u>	<u>Yrs. Experience</u>

- 3. Who in the applicant's organization is responsible for customer service? _____
- 4. How long does the applicant respond to complaints? _____
- 5. Would the applicant respond to homebuyers' complaints after their warranty periods?
If yes, what is the maximum time the applicant would do this? Yes No
- 6. Please describe the process by which the applicant handles homebuyer's complaints, including documentation and follow-up with the homebuyer. Include a description of the applicant's process when a subcontractor is needed for repairs. Please include the follow-up procedure after the repairs have been made:

- 7. Does the applicant provide a homeowners manual which describes maintenance schedules and proper use of property to all homebuyers? Yes No
- 8. Are homeowner's warranty policies provided to homebuyers? Yes No
- 9. Please attach a sample homeowner warranty policy.

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 forms a part of such policy.

Signature of Applicant: _____ Title (Officer, Partner): _____

Date: _____