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## CONTRACTOR'S SUPPLEMENTAL QUESTIONNAIRE

**Note: Throughout this questionnaire the words "you" and "your" include all entities seeking coverage.**

1. Name(s) of Applicant: \_\_\_\_\_

Years in business of entities seeking coverage? \_\_\_\_\_\*

\*If this is a new operation, please provide details on prior experience of owners (attach resumes):  
\_\_\_\_\_

2. What percentage of your work is: (each line must add to 100%)

a. Residential: \_\_\_\_\_ Industrial: \_\_\_\_\_ Commercial: \_\_\_\_\_

b. New Construction: \_\_\_\_\_ Remodel/Repair: \_\_\_\_\_ Remodel/Repair: \_\_\_\_\_  
(non-structural) (structural)

- Please provide a specific breakdown of any residential work performed as follows:

Single Family Custom Homes	_____ %	New Construction	_____ %	Repair/Remodel
Tract Homes	_____ %	New Construction	_____ %	Repair/Remodel
Condos/Townhouses	_____ %	New Construction	_____ %	Repair/Remodel
Apartments	_____ %	New Construction	_____ %	Repair/Remodel

3. What percentage of your work is as a:

General Contractor: \_\_\_\_\_% Subcontractor: \_\_\_\_\_% Construction Manager: \_\_\_\_\_%

4. Do you use subcontractors? Yes ( ) No ( ) If yes, complete the following:

a. Percentage of your work subcontracted out: \_\_\_\_\_% Annual Costs: \$ \_\_\_\_\_

b. List the trades of the subcontractors you use and give the percentage of work they perform:

\_\_\_\_\_ Striping \_\_\_\_\_% \_\_\_\_\_ Sealing \_\_\_\_\_% Other \_\_\_\_\_%  
\_\_\_\_\_ Concrete \_\_\_\_\_% \_\_\_\_\_ Concrete Pumping \_\_\_\_\_% Other \_\_\_\_\_%

c. Do you collect certificates from all subcontractors? Yes ( ) No ( )

If yes, what are the minimum limits required? \$ \_\_\_\_\_

d. Do you require all subcontractors to name you as an additional insured: Yes ( ) No ( )





e. Does your contract with subcontractors include a hold harmless favoring you? Yes ( ) No ( )

f. How long do you maintain records of the above documents? \_\_\_\_\_

5. Where do you perform work? \_\_\_\_\_

Do you do any work outside of California? Yes ( ) No ( )

Describe your work: \_\_\_\_\_

6. Gross receipts for the next 12 months and for the past 4 years:

Next 12 months \$ \_\_\_\_\_ Last 12 months \$ \_\_\_\_\_

2<sup>nd</sup> year \$ \_\_\_\_\_ 3<sup>rd</sup> year \$ \_\_\_\_\_ 4<sup>th</sup> year \$ \_\_\_\_\_

7. Number of owner, officers, and partners active at job sites or performing supervisory duties:

\_\_\_\_\_

Payroll of the employees (other than owners, officers, partners and clerical) \$ \_\_\_\_\_

Cost of leased, temporary, staffing service, casual labor \$ \_\_\_\_\_

(if not included in above)

Total Payroll \$ \_\_\_\_\_

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

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

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

1. \_\_\_\_\_

2. \_\_\_\_\_

Dollar value of average job completed (including all materials, labor, and equipment): \_\_\_\_\_

10. a. How many new homes will you build as a general contractor in the next year? \_\_\_\_\_

b. What is the greatest number of new homes you have built in any one year? \_\_\_\_\_



11. Do any prior operations differ substantially in nature from current operations? Yes ( ) No ( )

Please explain: \_\_\_\_\_ Not Applicable: \_\_\_\_\_

**Note: the following question applies to work done in any capacity (including general contractors, developers, artisans, remodeling contractors, site work contractors, suppliers, etc.):**

12. Have you ever or will you perform work involving or related to NEW CONSTRUCTION, on or about the premises of:

- a. Condominiums or townhouses: Yes ( ) No ( )
- b. Apartments: Yes ( ) No ( )
- c. Tracts, PUD's, or any other development, premises or project with more than 7 homes built or planned: Yes ( ) No ( )

Please provide details for any "yes" responses:

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13. Have you ever performed work on hillsides, hilltops, slopes, landfill or other subsidence areas, or do you plan to in the future? Yes ( ) No ( ) If yes, maximum degree of slope: \_\_\_\_\_

If yes, please describe:

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14. Have or will any of your projects involve caissons, cantilevers, piers, retaining walls, shoring, underpinning, or other heavy structural engineering techniques? Yes ( ) No ( )

If yes, please describe:

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If retaining walls have been or will be built, maximum height: \_\_\_\_\_ ft

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

If so, what percentage? \_\_\_\_\_% Maximum height: \_\_\_\_\_ ft

16. Do you perform any work below ground level? Yes ( ) No ( )

If so, what percentage? \_\_\_\_\_% Maximum depth: \_\_\_\_\_ ft

17. Have you ever or will you build, remove, repair or replace roofs? Yes ( ) No ( )

If yes, please describe, and indicate % of hot tar work (if any):

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18. Have you or will you work as a construction manager on a fee basis? Yes ( ) No ( )



Have you or will you supervise subcontractors whose payments are run through another entity?

Yes ( ) No ( ) If yes, please describe:

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19. In the past 3 years have you been fired or replaced on a job in progress? Yes ( ) No ( )

In the past 3 years have you replaced another contractor on a job in progress? Yes ( ) No ( )

If yes, please provide details:

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**20. Note: the following questions apply regardless of whether the applicant was at fault for a claim or incident, and regardless of whether the claim or incident was covered by insurance. Explain any “yes” answers in the space provided below:**

a. Have there been any losses, claims or suits against you in the past 5 years? Yes ( ) No ( )

b. Are there any claims or legal actions pending against any of the entities named in the application?

Yes ( ) No ( )

c. 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 any such entity?

Yes ( ) No ( )

d. Have you been accused of faulty construction in the past 5 years? Yes ( ) No ( )

e. Have you been accused of breaching a contract in the past 5 years? Yes ( ) No ( )

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21. For each of the following activities, check:

Yes: if the activity has or will be preformed, subcontracted, or supervised by applicant.

No: if the applicant has never and does not plan to perform, subcontract, or supervise the activity.

a. Demolition	Yes ( )	No ( )	n. Road/Highway/Bridge/ Overpass Construction	Yes ( )	No ( )
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b. Concrete Tilt-Up Const.	( )	( )			
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c. LPG work	( )	( )	o. Underground Tank	( )	( )
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d. Seismic Retrofitting	( )	( )	removal, repair or installation		
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e. Swimming Pool Const.	( )	( )	p. Work on Gas Lines/Pumps	( )	( )
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f. Boiler Installation/Repair	( )	( )	q. Asbestos or Lead Abatement	( )	( )
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|----------------------------------|---------|---------------------------------|---------|
| g. Industrial Machinery Repair   | ( ) ( ) | r. Environmental Cleanup        | ( ) ( ) |
| h. Use of Cranes                 | ( ) ( ) | s. Dam or Levee Work            | ( ) ( ) |
| i. Rental of Equipment to others |         | t. Traffic Signals/Control Work | ( ) ( ) |
| j. Process Piping                | ( ) ( ) | u. Gas Stations                 | ( ) ( ) |
| k. Refineries                    | ( ) ( ) | v. Airports                     | ( ) ( ) |
| l. Chemical Plants               | ( ) ( ) | w. Public Utilities             | ( ) ( ) |
| m. Hospitals                     | ( ) ( ) |                                 |         |

Explain any “yes” answers to Questions 24, and state whether performed by insured or subcontracted:

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**Warranty:** The purpose of the Supplemental Questionnaire is to assist the underwriting process. Information contained herein is specifically relied upon in determination of insurability. The undersigned, therefore, warrants that the information contained herein is true and accurate to the best of his knowledge, information and belief. This Supplemental Questionnaire, and the application to which it is appended, shall be the basis of any insurance policy that may be issued and will be a part of such policy.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Signature of producer: \_\_\_\_\_ Date: \_\_\_\_\_

Name and Title: \_\_\_\_\_