

WRAP-UP LIABILITY

PLEASE ANSWER ALL QUESTIONS
IF A QUESTION OR SECTION IS NOT APPLICABLE THEN PLEASE ANSWER "N/A"

Section 1 – General Information

1. Name of Applicant: _____
(And all Subsidiaries) _____

2. Mailing address: _____
_____ Website Address: _____

3. Project Participants:
 - a) Owner: _____
 - b) Project/Construction Manager: _____
 - c) General Contractor: _____ Year Business Started: _____
 - d) Prime Architectural/Engineering Consultant: _____
 - e) Geotechnical Engineer: _____

4. Claims Experience:

Please detail any liability claims (exceeding \$10,000 per accident) incurred by any of the below which resulted from construction operations in the past five (5) years. Please indicate the date, amount, and nature of the claim.

 - f) Owner: _____

 - g) Project/Construction Manager: _____

 - h) General Contractor: _____

Section 2 - PROJECT INFORMATION

5. Name of Project: _____

6. Address/Location of Project: _____

7. Construction Period: From: _____ To: _____

8. Policy Term (if different from above): From: _____ To: _____

9. Total Estimated Project Value (Attach breakdown if available): \$ _____

a) Hard Costs: \$ _____

b) Soft Costs: \$ _____

10. Completed Operations Period: 12 months 24 months Other: _____

11. Limit of Liability Requested: \$2,000,000 \$5,000,000 \$10,000,000

12. Deductible Requested: _____

13. Detailed Project Description: _____

a) New Construction? YES NO

If new construction, will any portion of the project be occupied prior to completion? YES NO

If yes, please provide details (period, extent, and nature of occupancy): _____

b) Renovation? YES NO

If renovation, please provide a complete description of the renovation work, including the cost of the renovations and value of the existing structure: _____

Is coverage required for damage to existing structure? YES NO

If yes, will the existing structure be occupied during construction? YES NO

If yes, describe the nature of occupancy: _____

14. Project Data:

- a) Height of structure (number of story's): _____
Below grade: _____ Above Grade: _____
- b) Total Area (sqft): _____ c) Number of Buildings: _____

If more than one (1) building, please provide value of each building and distance between each building: _____

15. Construction Materials:

- a) Framework: _____
- b) Exterior Walls: _____

- c) Is an Exterior Insulation and Finish System (EIFS) used? YES NO
- If yes, does the EIFS assembly include expanded polystyrene insulation (EPS) or other combustible material? YES NO

- d) Roof Materials: Structure: _____ Covering: _____
- e) Floor Materials: Structure: _____ Covering: _____

16. Type of foundation for each structure: _____

17. Are there any hot roofing operations? YES NO

- a) What percentage of the roof is undergoing hot roofing operations: _____ %
- b) Anticipated value of this work \$ _____

18. Are there any torch-on applications? YES NO

19. Will the project be sprinklered? YES NO

If yes, at what stage of construction will the sprinkler system be in operation? _____

20. Will fire hydrants be operational from commencement of project? YES NO

21. Adjacent Structures (attach site plan if available):

	Type of Construction	Occupancy	Distance (in ft.)
North			
South			
East			
West			

22. Neighbourhood description: _____

23. Security:

a) Is site fenced? YES NO Height/Type: _____

b) Watchman service? YES NO Hrs./Rounds: _____

c) Monitored Alarm at lock up? YES NO

d) Video Surveillance? YES NO Type: _____

e) Is the site well lit? YES NO

f) Please describe other security measures being taken: _____

24. Are there any demolition operations? YES NO

If yes, will the demolition operation be complete prior to commencement of the project? YES NO

If not:

a) Anticipated value: \$ _____

b) Description of demolition operations: _____

c) Name and experience (# years) of demolition contractor: _____

25. Is this a fast-track project? YES NO

If yes, please detail experience with similar projects: _____

26. Geotechnical Data and Construction Data:

a) Has a geotechnical report been completed? YES NO

If not, please advise reasons: _____

b) Will the project be constructed in compliance with geotechnical recommendations? YES NO

If not, please describe why in detail: _____

27. Please describe any unusual or experimental features in construction or design: _____

28. Do you have any written loss prevention procedures for the prevention/mitigation of water damage losses? YES NO

29. Do you have written loss prevention procedures for the prevention/mitigation of fire losses? YES NO

30. Please list the Project Manager's/General Contractor's five largest projects in the past five years:

^ ^ ^ ^ ^ ^ ^ ^ ^

This application does not bind the Applicant or the Company to complete this insurance but it is agreed that the information contained herein shall be the basis of the contract should a policy be issued.

It is mutually agreed between the Company and the Applicant that any inspection of premises, operations or any matter pertaining to insurance afforded by the Company, is made for the use and benefit of the Company only and is not to be relied upon by the Applicant in any respect.

THE UNDERSIGNED HEREBY ACKNOWLEDGES THE TRUTH OF THE STATEMENTS CONTAINED HEREIN.

I AUTHORIZE YOU TO COLLECT, USE AND DISCLOSE PERSONAL INFORMATION AS PERMITTED BY LAW, IN CONNECTION WITH YOUR COMMERCIAL INSURANCE POLICY OR A RENEWAL, EXTENSION OR VARIATION THEREOF, FOR THE PURPOSES NECESSARY TO ASSESS THE RISK, INVESTIGATE AND SETTLE CLAIMS, AND DETECT AND PREVENT FRAUD, SUCH AS CREDIT INFORMATION, AND CLAIMS HISTORY.

DATED: _____ APPLICANT'S SIGNATURE: _____

BROKER NAME:	_____
ADDRESS:	_____ _____ _____
PHONE NO.:	_____
FAX NO.:	_____

Email Form

Print Form