

SUBCONTRACTORS' SUPPLEMENT - Horizon E & S

This Supplement is intended for use with the standard ACORD application. It is not a free-standing application. No proposals of insurance can be offered without a completed ACORD application.

Name of applicant: _____

Part 1: Construction Activities History:

1. Describe your operations:

2. What cities and/or counties do you work in?

3. What percentage of your work is:

Commercial	_____
Residential	_____
Industrial	_____
Other (describe)	_____

4. Have you ever worked for a residential developer? Yes / No
If so, describe _____

5. Have you ever been a general contractor? Yes / No
If so, describe: _____

6. On a typical project, what percentage of your work is performed by:

a. Your employees	_____
b. Leased employees	_____
c. Sub-contractors under your supervision	_____

7. Do you perform work over two stories above grade? Yes / No
If Yes, what percentage? _____
Please Describe _____

8. Do you perform work below grade? Yes / No
If Yes, what percentage? _____
Please describe _____

9. Do you now, or have you ever built on hillsides, slopes, landfills, or other terrain's susceptible to Subsidence? Yes / No
If Yes, describe _____

10. Do you draw any blueprints or plans used in your construction work? Yes / No
If Yes, describe _____

10. Do you now or have you ever carried either "Professional Liability" or "Errors and Omissions" Insurance? Yes / No
If yes, provide the carrier, policy term and limit of liability and note any losses _____

11. Applicant Comments Relating to Part 1: _____

CONTRACTORS' SUPPLEMENT (Continued)

Part 2: Types of Work Performed:

1. Indicate whether the following trades are:
R – Retained, meaning work performed by your own employees
S – Subcontracted, meaning work performed for you by subcontractors
N/A - Not applicable to your operation

Grading	R__ S__ N/A__	Landscaping	R__ S__ N/A__
Excavation	R__ S__ N/A__	Debris Removal	R__ S__ N/A__
Concrete	R__ S__ N/A__	Street paving	R__ S__ N/A__
Framing	R__ S__ N/A__	Parking Lot Paving	R__ S__ N/A__
Carpentry	R__ S__ N/A__	Guard Rail Installation	R__ S__ N/A__
Roofing	R__ S__ N/A__	Bridge Construction	R__ S__ N/A__
Siding	R__ S__ N/A__	Pile Driving	R__ S__ N/A__
Stucco	R__ S__ N/A__	Rebar installation	R__ S__ N/A__
Drywall	R__ S__ N/A__	Residential Svc/repair	R__ S__ N/A__
Painting	R__ S__ N/A__	HVAC	R__ S__ N/A__
Electrical	R__ S__ N/A__	Glazing	R__ S__ N/A__
Plumbing	R__ S__ N/A__	Guniting	R__ S__ N/A__
Masonry	R__ S__ N/A__	Sewer Const.	R__ S__ N/A__
Interior Demolition	R__ S__ N/A__	Gas Main Const	R__ S__ N/A__

2. Do you now or have you done work for municipalities or the government? Yes / No
 If Yes, describe _____

3. Special Hazards:
 Do any of your operations involve any of the following?

Asbestos Removal	Yes__ No__
Demolition other than Interior	Yes__ No__
Shoring or Underpinning	Yes__ No__
Caisson or Cofferdam	Yes__ No__
Blasting	Yes__ No__
Lead Abatement	Yes__ No__
Artificial Stucco Installation	Yes__ No__
Artificial Stucco Removal	Yes__ No__

4. How many years have you been in business under your present name or business entity? _____

Part 3: Subcontracted Work History

1. If you **NEVER** hire subcontractors check here and move on to part 4 _____
2. Do you always require your subcontractors to sign a hold-harmless or indemnification agreement in your favor? Yes / No
3. Do you utilize a standard contract with ALL of your subcontractors? Yes / No (if Yes, please attach a copy to this questionnaire)
4. a. Do you require your subcontractors to carry General (Public) Liability insurance? Yes / No
 b. Do you require that you are named as an ADDITIONAL INSURED on their policies?
 Yes / No
 c. What is the minimum limit of liability you require your subcontractors to carry?

- d. Do you request certificates of insurance from your subcontractors in order to verify compliance with items 4a, 4b, and 4c above? Yes / No
- 5. a. Do you require your subcontractors to carry workers compensation insurance? Yes / No
- b. Do you request certificates of insurance from them to verify compliance with 5a above? Yes / No

Part 4: Historical Premium Basis

1. Please complete the following chart as completely as possible

<u>Policy Year</u>	<u>Gross Receipts</u>	<u>Gross Payroll</u>	<u>Subcontracted Cost</u>
Current term	_____	_____	_____
1 st Prior term	_____	_____	_____
2 nd Prior Term	_____	_____	_____
3 rd Prior Term	_____	_____	_____
4 th Prior Term	_____	_____	_____
5 th Prior Term	_____	_____	_____

2. Please describe the five largest projects undertaken by you in the last five years

	<u>Description</u>	<u>Job Cost</u>	<u>Project Duration</u>
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____
d.	_____	_____	_____
e.	_____	_____	_____

3. Please describe the three largest projects planned for the upcoming year

	<u>Description</u>	<u>est. Job Cost</u>	<u>est. Project Duration</u>
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____

Part 5: Supplemental Information

1. Are you involved in any other business besides contracting? Yes / No

If Yes, describe _____

2. Have you now or ever been involved in or aware of pending litigation concerning defective workmanship? Yes / No

If Yes, describe _____

3. Any additional comments: _____

To the best of my knowledge the information included by me on this supplement is correct.

Applicant's Signature _____ Today's Date _____

Applicant's Name _____
(Please Print Name and Title)