

G&G Underwriters, LLC

Contractors Supplemental Questionnaire

Insured: _____ Effective Date: _____

Agency: _____ Expiration Date: _____

1. Number of years in business?
2. Number of years of experience in this type of business?
3. A. List and describe your last 5 jobs: _____

- 3 B. Do you or have you ever done work for a large tract home or other residential developer? If yes, list company by name
: _____

4. Annual Payroll: _____ Annual Receipts: _____
5. Number of Principals? _____ Number of Full time Employees? _____ Number of part time? _____
6. Annual Cost of Subcontractors _____ Describe type of work subcontracted _____
7. Do you require insurance certificates from all subcontractors?
8. What percentage of your work is residential % Commercial %
9. What percentage of your work is New construction % Remodeling %
10. Are you licensed by any state? If yes, give license # _____
Name on License _____.
11. Do you perform any work in the state of New York?
12. Do you do any exterior work over three stories?
13. Do you do any roofing?
14. Do you do any work on or around swimming pools?

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15. Do you have tools that are used in your business?

- Where are tools stored? Are tools carried to and from job-site for use?
- Are tools kept securely locked while not in use at the job-site?
- Any tools left at the job-site when you are not on-site or over-night?

It is recommended that any one tool item valued over \$500 be scheduled on the insurance policy. Please provide separate list indicating model #, serial #, description and use as well as value NEW per item

16. Do you loan or rent any equipment to others?

17. Do you lease any equipment from others (with operator) (without operator)

18. Have you ever done any demolition work or do you plan to do any demolition work?

19. Do you have any other businesses or own any other properties?

20. Have you had any insurance declined, cancelled, or non-renewed in the past 3 years?

21. Do you do any snow plowing? Ice or Snow Removal?

- Any plowing of streets, roads or highways?
- Do you have any written contracts to provide snow plowing?
- Provide copies
- Annual receipts for snow plowing _____

Carpet Cleaners

Any hardwood floor waxing or cleaning?

Painters

1. Inside % Outside %
2. Any painting of water or gas tanks?
3. Any painting of bridges or towers?
4. Any exterior spray painting done?

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Plumbing, Heating and Air conditioning

1. Any installation of high pressure systems?
2. Any installation of fire sprinkler systems?
3. Any mechanical contracting operations?
4. Do you use a crane?

Carpentry – siding

1. Any shop work done?
2. Do you do any gutting of interior load bearing walls?

Electrical

1. Do you install burglar or fire alarm systems?
2. Any high voltage, over 440 overhead wiring done?
3. Any Traffic Signal work?
4. Any solar panel installation over 3 stories?
5. Any electrical work done in hospitals or life support systems?

Masonry

1. Any Excavation? If any, provide depth.
- 2 Any use of EIFS?

Fencing

1. Any installation of security electrical fencing?
2. Any barbed wire fencing?
3. Any sales or installation of playground equipment?
4. Any sales or installation of anything other than fences? If so, provide details.

I, THE UNDERSIGNED, HAVE COMPLETED, READ AND UNDERSTAND ALL INFORMATION PROVIDED ON THIS QUESTIONNAIRE.

Producer: _____ *** Applicant** _____

(*please have the applicant sign the supplement as well as the complete applications so that we may document our files properly.)