
Contractors Supplement General Liability Application

Named Insured: _____

Indicate type of operation by percentage of work (should add to 100%)

_____ Exterior Painting	_____ Drywall	_____ Interior Painting	_____ Electrical
_____ Carpentry	_____ Plumbing	_____ Doors and Windows	_____ Landscaping
_____ Cabinetry	_____ Flooring	_____ Mason: Flat Work	_____ Mason: Brick/Brick work
_____ Other	Describe: _____		

Describe the percentage and nature of any operations in a commercial environment: _____

Number of residential snow plowing accounts _____ Number of commercial snow plowing accounts _____

Describe the percentage and nature of excavation work: _____

List machinery used: _____

Spray Painting: Residential Interior _____% Residential Exterior _____%
 Commercial Interior _____% Commercial Exterior _____%

Describe the percentage of roofing operations: _____% of new roofs _____% tear-off and re-roofs _____% repairs

Percentage of hardwood floor refinishing operation _____%

Maximum Height exposure in stories or feet? _____

Number of full time employee (including owner) _____ Number of part-time employees _____

Percentage of work sub-contracted to others? _____% Are certificates of insurance obtained for each? Yes No

Percentage of out of state work (list each state and percentage): _____

Total Gross annual sales: \$ _____ Total annual payroll? \$ _____

Number of years in business under the current business name? _____ opera-
tions _____

Prior insurance carrier name for the current business? _____

Describe any losses in the past three years under the current business name? _____

Has insured conducted business under a DIFFERENT business name other than the one listed on this application in the last 3 years? Yes No

If yes, state name of business, prior carrier and is that business still active?

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FRAUD STATEMENT

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation. (New York)

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Telephone Number: _____ Cell Phone Number: _____

Applicant Signature

Date