## **Builders Risk Supplemental Application**

Applicant's Name	Agent NameAddress
Mailing Address	Proposed Effective Date:  To
Web Address	(12:01 am Standard Time at the address of the Applicant)
Applicant's  interest:  Owner  Contractor  Sub- Contractor	or   Developer   Seller   Other
Years doing business under current nameyears	Years of Experience years
Have you worked under any other name?  If yes, please explain:	□ Yes □ No
Name & Address of General Contractor:	
Certificates from Subcontractors	□ Yes □ No
Project Limits	
Limits of Insurance	\$
Completed Value of Project, plus	\$
Value of Temporary Structures,	\$
TOTAL Project Limit of Insurance	\$
Sub-Limit: Property at Location Other than Job Site	\$
Sub-Limit: Property in Transit	\$
If project is Renovation, and Value of unoccupied existing structure is to be included in this coverage:	
ACV of Existing Structure, plus	\$
Value of Renovations, Repairs, Additions	\$
Completed Value of Project	\$
Description of Project:	
Location of Job Site:	
List any unusual characteristics of the project.	
List types of temporary structures ie, fencing, forms, scaffoldi	ng, field office trailers or other such properties
Deductible(s): \$ Property @ Job Site or any	Other Location \$ Property in Transit

MSA004 (01/14) Page 1 of 3

## **Builders Risk Supplemental Application**

Exposure(s)											
Construction: Project is:	<ul><li>Frame</li><li>Non-Combustible</li><li>Single Job</li><li>New Construction</li></ul>		Joisted Masonry Modified Fire-Resistive Multiple Projects Renovation		Masonry Non-Combustible Fire-Resistive Addition			ustible			
Is this an extension of a	n existing Builders Risk Policy?					Yes		No			
Any unusual construction materials, techniques, locations or final occupancies?								No			
Any unusual construction materials, techniques, locations or final occupancies?   Yes   No  If Yes, please explain:											
Apartment or Condomin	ium Complexes?					Yes		No			
Any multi unit construction	on such as tract homes, town h	omes o	r patio homes?			Yes		No			
Any communication Tow	vers?					Yes		No			
Any bridges or tunnels?						Yes		No			
Any structures exceeding	g 3 stories or 50 ft in height?					Yes		No			
Is Job site Fenced?						Yes		No			
Is Job site Lighted?						Yes		No			
Any removal, replaceme	ent or alteration of Load bearing	walls?				Yes		No			
If Yes, please describe:											
Any excavation beneath	or raising of an existing structu	re?				Yes		No			
If yes, please describe:											
Any rigging or hoisting o	perations?					Yes		No			
Any underground constr	ruction?					Yes		No			
If yes, please describe:											
Any aircraft property?						Yes		No			
Any grain silos?						Yes		No			
Any over water exposure	es?					Yes		No			
Mortgagee/Loss Payees	<b>:</b>										
Number of floors above	ground:		Below Ground:								
Off site storage Location	n, Description and Protection:										
Maximum Values @ Ris	k \$				\$						
Transit Methods:											
Maximum Value any one	e shipment?				\$_						
Protection Class:	Distance to Fire Station:		Paid or Volun	teer	Firemer	າ?					
Private Fire Protection A	vailable?	Distar	nce to operating Fire Hydrant: _								
Patrolled by watchman a	after working hours?					Yes		No			
Regularly patrolled by P	olice?					Yes		No			
Describe other protective	e measures:					Yes		No			
Additional Comments:											

MSA004 (01/14) Page 2 of 3

## **Builders Risk Supplemental Application**

In the past 3 y similar insurar		has any company ever cancelled, non-rene o you?	wed, declined or refused	I to issue	_ Y	′es □ No			
If yes, please	desci	ribe							
Do you have a result in a clair		nown events occurred prior to the proposed	effective date of this pol	icy that may	_ Y	′es □ No			
If yes, please	desci	ribe							
Loss History	ı		<u> </u>			T			
Date of Loss		Description of Loss	Amount Pa	d Amount Reserved		Claims Status (Open or Closed)			
Prior Carrier	Info	rmation							
Year		Carrier			Premium				
that the inform	natio	e does not bind the Applicant nor the Co n contained herein shall be part of the b reby certifying that all information is acc	pasis of the contract sl	hould a poli	cy be iss				
Applicants	Sig	nature		Da	te _				
Agents Sig	ınat	ure			-				

MSA004 (01/14) Page 3 of 3