

Builder's Risk Application

Insured's Information

			_			
Mailing Address						
City		State				
Phone Number		E-Mail Address				
Incomed's fame of business	- Dortmarchia In	dividual - Cor	eration DUC DO	th or		
Insured's form of business Is the builder's name differ			oration LLC DO			□No
Does builder/remodeler/o						LINO.
Number of structures/proj					her	
Number of structures/proj			□1-2 □3-5		nber	
Has the builder/remodeler						
			mount of each loss belo			,
,		, , ,				
Type of Project □ New	Construction	□ Remodel				
			do you need coverage fo			□No
			cture \$ Ar			
			ructure be covered on a		□Yes	□No
T (D)	— B		ns being done			
Type of Property	□ Residential	□ Commercial				
Policy Effective Date		— — — — — — — — — — — — — — — — — — —	□ 6 Months			
Policy Period Property Address Line 1						
Property Address Line 2						
Property City						
Property State						
Property Zip						
Property County						
· · · · ·						
Will the contractor be insu	ring more than one	building/project or	this policy or are there	any other buildings ins	ured with Zurio	ch within 100 feet
of this structure written or	another policy?					
□ No						
		alue of all structures	under construction with	iin 100 feet and insured	with Zurich, in	cluding this one is
\$						
Construction Material				a — a.		
Frame Joisted Masonry				Stone Veneer	o on Wood	J
What % of the structure is	giass? is tr	ie giass impact resis	ant? Yes No			
Protection class	Numbo	r of stories				
Protection class Intended occupancy			– a actual occupancy			
Will structure be occupied						
Square footage including b	•					
Any previous losses at this			d. fire or vandalism?			
			e peril involved, amoun	t of the loss and date of	the loss:	
			- р			
Is this a model home?	□Yes □No					
Has the project started?		rted on this date	ar	nd is % con	ıpleted. □] No
Expected completion date	of project	_				
Is there a sales contract on	this structure?	□Yes □No				
Is the structure modular?		□Yes □No				

If insuring multiple buildings (maximum 2 for residential) at one location, please enter the largest single building value under the any one structure limit and the total of all building values under the all covered property limit.



Base Coverages

Coverage description	Limit	Deductible
Total completed value of any one structure (greater than \$3,000,000 will require underwriter approval)		
Total completed value of all covered property (greater than \$3,000,000 will require underwriter approval)		

Additional Coverages

The following additional coverages apply to this policy. Depending on the policy type and coverage, you may increase the limits by entering the value into the limits field (reporting form policies not eligible for increase). An increase limit will result in an increase in premium.

Coverage description	Limit
Back-up or overflow of sewer, drains or sumps	
Debris removal	
Fire department service charge	
Ordinance or law	
Loss to the undamaged portion of the building	
Demolition cost	
Increased cost of construction	
Combined aggregate for demolition cost and increased cost of construction	
Pollution cleanup and removal	
Reward	
Scaffolding, construction forms and temporary structures	
Scaffolding re-erection	
Coverage description	
Property at a temporary storage location	
Property in transit	
Valuable Papers and Records	

The following optional coverages are available by endorsement for an additional premium charge.

Coverage description	Limit	Deductible
Better green endorsement- Building rating		
Expediting expense		
Change order endorsement □ Yes □ No		
Development/subdivision fences, walls or signs		
Earthquake Zone		
What is the building shape?		
Include coverage on the structure's exterior walls with more than 10% of masonry veneer		
Flood Zone		
Basement		
Does this project consist of multiple buildings? □Yes □No		
How many buildings are in this project?		
If this risk is held underwriting will be requesting the following information with respects to projects involving multiple		
buildings:		
1. Number of buildings in the project		
2. Number of stories per building		
3. Value of each building		
4. Square footage of each building		
5. Start and completion date of each building		
6. Will permanent coverage be placed on each building as it is completed?		
7. Distance between each building (provide a plot plan)		
Testing Coverage for Building Systems − Add testing coverage for building systems coverage □Yes □No		



	Limit	Deductible
	Lillie	Deddelibit
State	Postal Code	
Limit	Rate	Premium
Limit	Rate	Premium
Limit	Rate	Premium
Limit	Rate	Premium
		•
	Limit	Limit Rate Limit Rate

