

Contractors Supplemental Application – Welders

Name of Applicant _____

This application is intended for use with a completed Acord application and is not intended as a free-standing application. No proposals of insurance will be considered without a completed Acord application.

Part 1: Construction Activity History:

1. Years in business under current name _____
2. What states are you licensed to do business in? _____
3. What cities or counties do you mainly work in? _____
4. What percentage of your work is
a) General Contractor _____%
b) Sub-contractor _____%
5. What percentage of your work is
a) Commercial area _____%
b) Residential area _____%
c) Industrial area _____%
d) Rural area _____%
e) Other area _____%
Total _____% Should be 100%

d) Governmental _____%
e) Other _____%
Total _____% Should be 100%
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 _____%
If leased, are payrolls included in submission? Yes / No

Part 2: Types of Work Performed:

1. What percentage of your welding is
Gas _____% Under Water _____%
Arc _____% Chemical Plants _____%

Resistance	_____%	Petrochemical Plants	_____%
Thermite	_____%	Nuclear Facilities	_____%
Laser	_____%	Aerospace/Aircraft	_____%
Electron-beam	_____%	Bridges	_____%
(Should total 100%)	_____%	Marine	_____%

2. Does your work ever involve removal of encapsulated asbestos? Yes / No
 If yes, describe: _____

3. Does your work ever involve work within 50 ' of RR tracks? Yes / No
 If yes, describe, including special safety precautions: _____

4. In which of these organization, if any, do you participate?

- AWS
- ANSI
- NEMA
- NFPA

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

6. Do you ever lease equipment with operators? Yes / No
 If yes, Est. annual receipts leased **to** others \$ _____
 Est. annual costs leased **from** others \$ _____

If you lease **to** others, do you always secure hold harmless agreements, including indemnification wording, in your favor? Yes / No

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

- 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 minimum limits of insurance do you require your subcontractors to carry? _____
- d) Do you require your subcontractors to carry Workers Compensation insurance? Yes / No
- e) Do you request certificates of insurance from your subcontractors to verify compliance with the above? Yes / No

Part 4: Historical Exposure Basis

1. Please complete the following chart as accurately as possible

<u>Policy Year</u>	<u>Gross Receipts</u>	<u>Gross Payroll</u>	<u>Subcontracted Costs</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 welding? Yes / No
If yes, describe. _____

2. 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 limits of liability and note any losses. ____

3. Have you now or ever been involved in or are aware of pending litigation concerning defective workmanship? Yes / No
If yes, describe. _____

4. Any additional Comments: _____

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

Applicant's Signature _____ Dated ____/____/____

Applicant's Name _____
(Please Print)