

Berkshire Hathaway Homestate Companies

GENERAL CONTRACTORS SUPPLEMENTAL QUESTIONNAIRE

Name of Applicant: _____ Policy Number: _____

Are there any other entities or insureds that would be covered by this policy? Yes No If yes, provide names, nature of operations and their relationship to you. _____

Do you have a website? Yes No If Yes, provide the website address: _____

Have you **ever** operated under any other name or names? Yes No If yes, provide names and nature of operations.

Complete description of current operations (Be specific): _____

How many years have you operated this business? _____ How many years experience in the construction industry? _____

Are you licensed? Yes No Type of License _____ License # _____ Year Issued _____

List the towns or counties in which you generally work: _____

Do you or have you performed work in California, Arizona or Nevada? Yes No If so, which ones? _____

Do you or have you performed work in other states? Yes No If so, where and when. _____

Do you ever work as a Construction Manager on a fee basis? Yes No For what percentage of your work? _____

Indicate % of residential work performed in the past year:

Type	% New	% Repair or Remodel	Number of	Maximum Value Per Building
Single Family Custom Homes			Homes	\$
Apartments			Units/buildings	\$
Condos			Units/buildings	\$
Townhouses			Townhouses	\$
Tract Homes			Homes/Subdivision	\$
Other Residential			Units	\$

Have you built tract homes, townhouses or condominiums in the last ten years? Yes No
If Yes, please explain in detail and provide the number built? _____

Is there any work listed above that you are not currently doing but you have done in the last 10 years? Yes No
If so, please explain: _____

Indicate % of non-residential work performed in the past year:

Type	% New	% Repair or Remodel	Number of Projects	Maximum Value Per Building
Commercial Buildings				
Medical Facilities				
Schools				
Clean Rooms				
Industrial Buildings				
Other Non Residential				

Is there any work listed above that you are not currently doing but you have done in the last 10 years? Yes No
If so, please explain: _____

General Information

Do you or have you done any work on apartments over 3 stories or with more than 30 units per building? Yes No
Do you do any projects that are 3 stories or more? Yes No
Is scaffolding owned, rented or erected by you or your subcontractors? Yes No
Do you or have you **owned** cranes? Yes No Do you or have you rented cranes? Yes No
Do you lease or rent other mobile equipment? Yes No
If so, from whom? _____ With Operators? Yes No
Lease/Rental Fees: _____ Type of equipment leased: _____
Do you do any excavation below grade? Yes No
If so, maximum depth: _____ feet. % of total work ____%
Do you require soil and engineering studies for foundation work? Yes No
If so, is the work done by an outside firm or by you? : _____
Do you do, have you done or have you subbed out any EIFS/Stucco siding work? Yes No
Do you do, have you done or have you subbed out any clean room construction? Yes No
Do you, have you or have you subbed out any projects involving restoration, demolition or asbestos abatement? Yes No
Do you do, have you done or have you subbed out any public, institutional or industrial projects? Yes No
Do you do, have you done or have you subbed out any medical gas installation work? Yes No
Do you do, have you done or have you subbed out any projects involving dams or levees? Yes No
Have you or do you plan to build over water, on hillsides, on former landfills or in subsidence areas? Yes No
Do you have any discontinued operations? Yes No If so, explain: _____
Do you have any operations outside the realm of "contracting"? Yes No If so, explain: _____
Do you have a formal safety program in effect? Yes No
Describe your customer care or warranty program. _____

Real Estate and Development

Do you own any Real Estate Development Property or vacant land intended for future development? Yes No
If yes, is the property zoned? Yes No Is the property intended for Residential or Commercial use? _____
Number of acres available for development? _____ Number of lots available for development? _____
Have you sold any land to others intended for multiple home sites within a single subdivision? Yes No
Do you or any of your employees hold a Real Estate Agents' license? Yes No
Do you have any outstanding construction loans? Yes No
Do you build any spec. homes? Yes No How many each year? _____
Do you build any model homes? Yes No How many? _____
Do you employ an engineer or an architect? Yes No
Do you do design & build work? Yes No
Do you draw plans or blueprints used in your construction projects? Yes No

Other Insurance

Has any insurance company ever cancelled, non-renewed or decline to write similar coverage for you? Yes No
If you employ an Engineer or Architect do they have professional liability insurance? Yes No Limits _____
Do you have a workers' compensation policy currently in force? Yes No
Do you lease employees from others or to others? Yes No
Are any operations insured elsewhere by an OCIP or wrap up insurance program? Yes No

Loss and Claims History

Please provide five years of hard copy loss runs plus the information below related to construction defect claims.
Have you ever been named in a construction-related lawsuit? Yes No
If so, explain: _____

Are there any claims or legal actions pending against any of the entities named in the application? Yes No
 Have any known events occurred prior to the proposed effective date that may lead to a claim? Yes No
 Have you ever been replaced on a job or project in progress? Yes No If so, explain: _____

Rating Information

Category	Current year	1 st Prior	2 nd Prior	3 rd Prior	4 th Prior
Insurance Carrier	xxxxxx				
Insurance Premium	xxxxxx				
Number of Owners/Officers					
Number of Employees					
Total Direct Payroll					
Total Gross Receipts					
Subcontractor Costs (Labor)					
Subcontractor Costs (Materials)					
Subcontractor Costs (Total)					

Sub Contractors

List your primary subcontractors and their information

Name	Trade	# of Years Used As Sub	Sub Costs	Percent of Projects
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Do you require all subcontractors to provide certificate of insurance? Yes No
 Do you require all subcontractors to carry limits equal to your own? Yes No
 Do you require all subcontractors to name you as additional insured? Yes No
 Do you require all subcontractors to provide hold harmless for liability? Yes No
 How long do you maintain records of these documents? _____ years

Describe how you qualify and select your subcontractors _____

Residential Project List (Please include all homes built in the last 3 years, including work in progress)

Subdivision	Street Address	Sales Cost	Dates-Start/End
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

What is the average number of homes built per year over the last five years? _____
What is the average value per home for those built in the last five years? \$ _____
What is the maximum value of a home for those built in the last five years? \$ _____
What is the maximum number of homes you have built or will build in any one subdivision? _____

Commercial Project List (Please include all projects in the last 3 years, including work in progress, AND any projects over \$3 million that you have ever completed)

Location	Description of Work	Project Cost	Dates-Start/End
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Signature of applicant applying for insurance coverage: _____ **Date:** _____

Please attach a driver list, current financial statement and copy of your subcontractor agreement.