



### General Information

Applicant Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Location Address (if different from above): \_\_\_\_\_

Website Address: \_\_\_\_\_

Date Business Started: \_\_\_\_\_

What is your Radius of Operation?

0-50 miles \_\_\_\_\_%    51-200 miles \_\_\_\_\_%    201-500 miles \_\_\_\_\_%

List all states that you operate in: \_\_\_\_\_

Provide number of employees:    Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Seasonal \_\_\_\_\_

Description of operations: \_\_\_\_\_

1. Does the risk get involved in any of the following operations?

Aerial work with Aircraft or Drones	YES	NO
Airport or runway work or air traffic control tower work	YES	NO
Asbestos, lead paint, mold, radon, underground or above ground storage tank or hazardous abatement or mediation work	YES	NO
Blasting operations and/or blasting for others	YES	NO
Bridge work and overpasses, including structural repair	YES	NO
Concrete mix in transit or concrete pumping	YES	NO
Condominium or townhouse conversion work	YES	NO
Conveyor work	YES	NO
Crane usage, rental, or hiring	YES	NO
Crane rental to others – with or without operators	YES	NO
Dam or reservoir construction or contracting work on such structures including cofferdams and caisson buildings	YES	NO
Demolition work, other than soft demo inside of buildings for remodeling purposes and demolition of one-story structures in preparation of construction sites	YES	NO
Dredging operations	YES	NO
Drilling operations	YES	NO
Earth retaining wall operations, other than non-load bearing landscape walls that are a maximum 4 feet in height	YES	NO
Electrical high voltage, electrical power lines and hydroelectric and transformer	YES	NO
Environmental remediation/abatement/impairment operations of any type	YES	NO
Equipment rental with operators to others	YES	NO
Equipment rental without operators to others	YES	NO



Fire sprinklers	YES	NO
Fire suppression systems	YES	NO
Flood control prevention work	YES	NO
Gas mains	YES	NO
Haul oversized loads	YES	NO
Hauling underground storage tanks or contaminated soil or cutting/breakdown of the tanks	YES	NO
Highway or freeway construction work or services	YES	NO
Landfill or refuse operations, construction, or closure operations – past, present, or future	YES	NO
Levee or breakwater construction	YES	NO
Local trucking for hire (other than sand/gravel hauling <25% of total shipments)	YES	NO
Millwright work	YES	NO
On-site treatment of contaminated soils	YES	NO
Petrochemical, oil/gas, or oil field refining work, any operations conducted in oil field	YES	NO
Pile driving of any kind	YES	NO
Power line construction / work	YES	NO
Protective service work, such as security guards or alarm servicing or repair	YES	NO
Railroads, subway, or street railway construction work	YES	NO
Refineries	YES	NO
Snow plowing operations	YES	NO
Tank construction, removal, erection, cleaning, or repair (other than septic tank work) or underground storage tank removal including removal of contaminated soil	YES	NO
Telephone, telegraph, or cable line construction involving overhead exposures or work at heights	YES	NO
Traffic control services provided to 3rd parties	YES	NO
Traffic signs or signals	YES	NO
Tunneling work of any kind	YES	NO
Underpinning buildings	YES	NO
Waste treatment work, other than septic tank removal	YES	NO
Work from barges or any other types of floatation vessels	YES	NO
Work performed on 3 stories or higher	YES	NO

BASED ON ANSWERS PROVIDED - ADDITIONAL SUPPLEMENTAL QUESTIONNAIRES MAY APPLY

A full NIP supplemental will need to be completed if coverage is bound.

Provide details to any questions answered YES above

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### Risk Management

Does the insured have a Full Time Safety Director?	YES	NO
Does the insured have a Part Time Safety Director?	YES	NO
Does the Safety Director have at least 3 years' experience working as a Safety Director?	YES	NO
Does the Safety Director oversee all daily operations?	YES	NO
Are all locations secured, fenced, locked with security systems?	YES	NO

### Applicable to Inland Marine (Complete if Requesting Inland Marine)

Confirm the storage location for all Inland Marine scheduled equipment.

\_\_\_\_\_  
Describe anti-theft controls when equipment is left on jobsite

### Applicable to Automobile Coverage (Complete if Requesting Auto Coverage)

Do you have any Telematics in place? If yes, include name of Telematic software used.	YES	NO
Are all vehicles registered in the company name?	YES	NO
Is the driving of PPTs limited to the owners and senior management?	YES	NO
Are any company vehicles driven for personal use?	YES	NO
Do any employees use their personal vehicle for work? How Many?	YES	NO
Do you have any drivers under age of 21?	YES	NO
Do you have a formal written plan Safety Program in place?	YES	NO
Do you have a formal written plan Vehicle Maintenance Program?	YES	NO
Do you have a Fleet Manager on staff?	YES	NO
Do you have pre-trip/post-trip inspections?	YES	NO
Do you have MVR verification program?	YES	NO
Do your drivers have CDL licenses for vehicles over 26K lbs GVW?	YES	NO
Do any family members have access/use to the PPT? If yes, please provide drivers names, DOB & License #'s	YES	NO

\_\_\_\_\_  
If any DOT filing are required, please list filing required and limit required.

\_\_\_\_\_  
Where are company vehicles stored at night? If multiple locations, please provide breakout by location. \_\_\_\_\_



Identify all vehicles that have been modified with special equipment and provide the cost or value of each modification. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do the values on the Auto Acord application include the value for all permanently mounted pieces of equipment (ie bucket, lifts, cranes, etc.)? YES NO

**Historical Auto**

	Expiring Year	1 <sup>st</sup> Prior Year	2 <sup>nd</sup> Prior Year	3 <sup>rd</sup> Prior Year	4 <sup>th</sup> Prior Year
Auto Premium	\$	\$	\$	\$	\$
# of Power Units					

Insured Signature \_\_\_\_\_

Date \_\_\_\_\_