

BUILDERS' RISK APPLICATION

Brokers Name: _____

Name of Applicant and Address: _____

Has Any Insurer Ever Cancelled or Refused Coverage: _____

The Project

Name of Project: _____

Location of Project: _____

Owner of Project: _____

Architect on Project: _____

Engineer on Project: _____

Number of Stories/Construction Details: _____

Square Area of Project/Detachment to Existing Structures: _____

Provide Details On:

Blasting	_____
Piling	_____
Underpinning	_____
Dewatering	_____

Site Security Provided: _____

Fire Protection at Site: _____

Type of Temporary Heating at Site: _____

Any Other Details on the Project: _____

Coverage

Contract Period: _____ Deductible: _____

Completed Value of Project: _____

Temporary Storage Limit: _____ Location: _____

Transit Limit/Point of Origin/Mode of Transport: _____

Full Details if a Renovation Project: _____

Intended Occupancy When Completed: _____

Flood Coverage: Yes No Deductible: _____

Is the Project Site Located in a Flood Plain: Yes No

Distance to Nearest Body of Water and Name of Body of Water: _____

Earthquake Coverage: Yes No Deductible: _____

Is the Project Site Located in an Earthquake Zone: Yes No

Details of Soft Cost Coverage and Limits: _____

Details on Other Coverage Required: _____

The Contractor

Name of General Contractor: _____

Experience of Contractor: _____

List of Similar Projects Completed (past 3 years): _____

Five year Loss History: _____

List Major Sub-Contractors/Trade/Experience/Value of their Work/Loss History if Available: _____

Any Other Details on the Contractor: _____

Additional Information

What Types of Testing Required Other than Normal Building Services: _____

Construction Schedule: _____

Detailed Description of Works: _____

On some projects we may require a Site Plan, a Soil Report and a copy of the Phase 1 Environmental Study.

Applicant's Signature

Date