

Artisan Contractors Application

Tower Risk Management

Date:		Producer Code:					
Producer:		Agent:					
Proposed Effective Date:		Proposed Expiration Date:					
Name Insured:							
Entity: <input type="radio"/> Individual <input type="radio"/> Corporation <input type="radio"/> Partnership <input type="radio"/> Joint Venture		<input type="radio"/> Other: _____	Year(s) in Business: _____ # of Year(s) Experience: _____				
Inspection Contact & Phone Number:		Radius Of Operations: _____ Miles					
Premises Information							
#	Address	Interest	Year Built				
1							
2							
3							
Nature of Business/Description of Operation:							
Insurance History (Indicate Premium & Losses for the Past 4 Years)							
Year	Company	Policy #	Premium	# of Claims	Paid Losses	Reserve Losses	Description
Large Losses: (Losses over \$10,000):							
Any Suits under <i>Breach of Warranty</i>: <input type="radio"/> No <input type="radio"/> Yes, Explain:							
Coverage Requested				Limits Requested			
<input type="radio"/> Yes <input type="radio"/> No Additional Insured				General Aggregate		\$	00,000
				Products/Completed Operations Aggregate		\$	00,000
				Personal & Advertising		\$	00,000
				Each Occurrence		\$	00,000
				Fire Dame (Any One Fire)		\$	0,000
				Medical Expense		\$	5,000
Deductible: Per Claim Bodily Injury & Property Damage: <input type="radio"/> \$250 <input type="radio"/> \$500 <input type="radio"/> Other: _____							

Indicate type of construction work preformed by the applicant:

Carpentry	%	Maintenance	%	Sewer	%
Concrete	%	Masonry	%	Steel (Ornamental)	%
Drilling	%	Mechanical	%	Steel (Structural)	%
Electrical	%	Painting	%	Street/Road	%
Excavating	%	Plastering	%	Supervisory Only	%
Gas Mains	%	Plumbing	%	Tunneling	%
Insulation	%	Roofing	%	Other: _____	%

Indicate % of work preformed in:

New Construction	%	Commercial	%	Inside Building	%
Remodeling	%	Industrial	%	Outside Building	%
Demolition	%	Residential	%	Other: _____	%
Repair	%	Institutional	%		

Attach list of all current/past projects for the last 12 months. Include a description of the project & its cost.

Underwriting Information (Explain all “Yes” Responses on the next page.)

Yes	No	
		1) Any exposures to flammables, explosives, &/or chemicals?
		2) Any demolition? Describe:
		3) Any catastrophe exposure?
		4) Do operations ever involve storing, treating, discharging, apply, or transporting hazardous materials?
		5) Has the applicant ever been involved in &/or will be involved in multiple unit structures (including condos, townhouses, apartments)?
		6) Has the applicant ever acted as &/or will act as a subcontractor on tract home subdivisions?
		7) Does the owner supervise jobs directly?
		8) Does the applicant lease equipment from others?
		9) Is machinery or equipment loaned, rented, or leased to others? With or without an operator.
		10) Does the applicant draw up plans, designs, or specifications?
		11) Does the applicant perform work above two stories?
		12) Does the applicant hold other people’s property for service or repair?
		13) Does the applicant perform any work below grade? Maximum depth: _____ feet
		14) Does the applicant always check with local authorities before digging?

Does the applicant have any prior claims and any knowledge of potential claims from their operations prior to policy inception? If yes, please explain:

Applicant's signature warrants authorization to request financial/TRW information on the insured and individual partners.

Any person who knowingly and with intent to defraud any insurance company or other person, files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and so shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

Applicants Signature:

Producer's Signature:

Date:

Date: