

ROOFING CONTRACTORS SUPPLEMENT

NAMED INSURED: _____

MAILING ADDRESS: _____

1. Number & types of projects currently in progress & locations:

2. Describe five largest jobs undertaken & completed in past five years:

3. Five years' gross receipts history:

_____	_____
_____	_____
_____	_____

4. Annual payroll for each workers' compensation code:

Classification _____ Payroll _____

_____	_____
_____	_____

5. What classes of work are subcontracted:

6. What is subcontract cost? _____ Does this include cost of materials? Y N

If so, what is estimated material cost? _____

7. What limits of Liability are subcontractors required to carry?

8. Are subcontractors required to name the Insured as Additional Insured & provide Insured with a Hold Harmless agreement? Y N

9. Are certificates of insurance obtained from all subcontractors? Y N

10. Attach copy of Independent Contractor Agreements used by the Insured.

11. Number of employed construction managers &/or superintendents? _____

Total number of employees: _____

12. Are you or have you been involved in installation or removal of asbestos material? Y N

If yes, explain: _____

13. Do you or have you been involved in installation of products containing formaldehyde: Y N

If yes, explain: _____

14. What percentage of work is: Industrial: _____ Commercial: _____ Residential: _____

15. Is Insured involved with the use of scaffolding? Y N

If yes, explain: _____

16. Are you a member of a trade association? _____

17. Are all jobs inspected by contractor, superintendent or foreman?

a. Prior to commencement of job? Y N

b. Before leaving Job Site daily? Y N

18. Do you have written procedures that are followed for jobs during inclement weather? Y N

If yes, explain: _____

19. Check the following if used in your work:

Hoists	Tankers	Cranes	Kettles
Forklifts	Conveyors	Roof Tractors	Torches

20. Do you use the following items at each job?

Barricades	Fire Extinguisher	Warning Signs
Plastic Sheeting	Roof Openings	Heat, Fire Scanners

21.

	Residential:	Commercial:
New Construction:	_____ %	_____ %
Re-roofing/Recover:	_____ %	_____ %
Replacement/Complete Tear Off:	_____ %	_____ %

22. Any High-rise work over 5 stories? Y N

23. Roofing types:

Built-up Roofs	_____ %	Modified Bitumen (torch)	_____ %
Urethane Roofs	_____ %	Metal	_____ %
Shingle	_____ %	Waterproofing	_____ %
Modified Bitumen (MOP)	_____ %	Urethane Heat	_____ %
If so, type	_____ %	Hot Tar	_____ %
If any waterproofing, type?	Spray _____ %	Roll _____ %	Brush _____ %

Signature of Applicant

Date