CONTRACTORS AND CONSULTANTS APPLICATION
PLEASE ANSWER ALL QUESTIONS IN FULL

NOTICE: If a policy is issued, the limit of liability available to pay judgments for settlements shall be reduced by amounts incurred for legal defense. Further note that amounts incurred for legal defense shall be applied against the deductible or retention amount.

APPLICANT			DATE
ADDRESS			
CITY	STATE	ZIP CODE	TELEPHONE #

Company is an: Individual____ Partnership____ Corporation____ Joint Venture____ Other (describe) _____

1. COVERAGE REQUESTED
☐ New Business ☐ Renewal

☐ Commercial General Liability
☐ Contractors Pollution Liability
☐ Professional Liability

Proposed Retroactive Date:

2. Proposed Effective Date:

3. LIMITS OF LIABILITY/DEDUCTIBLE
Limits Requested:
Deductible Requested:

4. Other Coverages and Endorsements:

5. HISTORY OF COMPANY

Date Established: | Web Address:

Have there been any acquisitions, consolidations, dissolutions, mergers? ☐ Yes ☐ No

If yes, explain:

Does the firm have: ☐Subsidiaries ☐ A parent company ☐ Other related entities

If yes, explain:

Do you share employees? ☐Yes ☐ No If yes, explain:

6. PRIOR LIABILITY CARRIER INFORMATION

COVERAGE FORM	CARRIER	RECEIPTS	LIMIT OF LIABILITY	DEDUCTIBLE	TYPE OF POLICY	RATE	PREMIUM

Any policy or coverage declined, cancelled or non-renewed during the prior three years?
☐ Yes ☐ No If yes, explain:

ALL APPLICANTS MUST SUBMIT THE FOLLOWING INFORMATION IN ADDITION TO THE APPLICATION:
1) Qualifications including resumes, brochures and a listing of previous projects.
2) Most recent annual income statement and balance sheet.
3) Five years of valued loss runs including pollution and professional, if applicable.
4) Copy of expiring policy, if any, showing retroactive dates.

7. Total personnel (List each person only once by primary function):
a. Architects, Engineers, Geologists, Hydrogeologists _____
b. Industrial Hygienists, Toxicologists, CIHs or CSPs: _____
c. Draftsmen, Technicians: _____
d. Supervisors/Foremen/Leadmen: _____
e. Laborers: _____
f. AHERA, Hazwopers: _____
g. Other (specify): _____

Please attach all key persons resumes, certifications and licenses.

8. Has any officer of the company ever been the subject of disciplinary action by authorities as a result of professional or contracting activities? ☐Yes ☐ No If yes, please explain: _____

_____

_____

9. Gross Receipts (GR) for the past 3 fiscal years:

1st prior year's GR:**$**_____ 2nd prior year's GR:**$**_____ 3rd prior year's GR:$_____.

Fiscal Year Period: _____ to _____.

Note: Gross Receipts are the total of all receipts, invoices and/or billings without any deductions of any kind. Please list your estimated gross receipts ***including subcontracted work*** for the next 12 months next to the appropriate category. List services not described below under "Other" (be specific):

CONTRACTING SERVICES	**Projected Gross Receipts**
ENVIRONMENTAL CONTRACTING:	
Asbestos Abatement Contracting	$
Lead-Based Paint Abatement Contracting	$
Crime Scene Cleanup Contracting	$
Environmental Drilling (not oil/gas)	$
Environmental Emergency Response Contracting – Spill Cleanup	$
Hazardous Material Clean Up Contracting	$
Hazardous Material Packing/Pickup	$
Illegal Drug Lab Cleanup Contracting	$
Groundwater Remediation Contracting	$
Landfill Construction Contracting	$
Liquid Waste Remediation Contracting	$
Medical Waste Pickup	$
PCB-light Ballast Removal	$
PCB-Removal/Remediation Contracting	$
Radon Mitigation Contracting	$
Soil Remediation Contracting – Bioremediation	$
Soil Remediation Contracting – Petroleum Contaminated Soil	$
Soil Remediation Contracting – Other than Petroleum Contaminated Soil	$
Trucking – Hazardous Material	$
Waste Incineration	$
Waste Water Treatment System Install/Maintenance	$
Wetlands Contracting	$
Other	
Describe:	$
Describe:	$
SERVICE STATION CONTRACTING:	
Aboveground Storage Tank Installation Contracting	$
Aboveground Storage Tank Removal Contracting	$
Underground Storage Tank Installation Contracting	$
Underground Storage Tank Removal Contracting	$
Storage Tank & Pipe Cleaning Contracting	$
Storage Tank & Part Sales (no installation)	$
Service Station Contracting (building, construction, concrete, electric)	$
Fuel System Equipment Installation Service & Maintenance (not tanks)	$
Other	
Describe:	$
Describe:	$
MOLD REMOVAL/DECONTAMINATION CONTRACTING:	
Mold Prevention Contracting	$
Mold Remediation Contracting	$
Mold, Fire, Water, or Storm Damage Restoration Contracting	$
Water Extraction Contracting	$
Other	
Describe:	$
Describe:	$

GENERAL CONTRACTING - NON-ENVIRONMENTAL SERVICES:	Projected Gross Receipts
Build Back - Restoration	$
Demolition Contracting – Interior Only	$
Demolition Contracting – Over 2 Stories	$
Demolition Contracting – Under 2 Stories	$
Drilling Contracting – Non Environmental (not oil/gas)	$
Excavation	$
Insulation Installation	$
Trucking - Non – Hazardous Material	$
Other	
Describe:	$
Describe:	$
Describe:	$
Describe:	$
TOTAL REVENUES FOR CONTRACTING SERVICES	**$**
PROFESSIONAL SERVICES	**Projected Gross Receipts**
CONSULTING / LABORATORY EXCLUDING MOLD, MILDEW OR FUNGUS:	
Environmental Compliance	$
Environmental Permitting	$
Air Monitoring	$
Environmental Sampling	$
Environmental Expert Witness	$
Environmental Litigation Support	$
Wildlife Studies	$
Environmental Impact Studies	$
Safety Training	$
Environmental Manual Preparation	$
Indoor Air Quality Consulting	$
Industrial Hygiene / Health and Safety Consulting	$
Phase I Environmental Site Assessments	$
Phase II Environmental Site Assessments	$
Phase III Environmental Site Assessments	$
Environmental Remedial Investigation / Studies	$
Environmental Feasibility Studies	$
Hazardous Materials Consulting	$
Underground Storage Tank Testing	$
Environmental Laboratories	$
Wetlands Consulting	$
Geotechnical Consulting	$
Geophysical Consulting	$
Radon Testing	$
Other:	
Describe:	$
Describe:	$
Describe:	$
Describe:	$
MOLD, MILDEW OR FUNGUS - CONSULTING / LABORATORY:	
Air Monitoring for Mold	$
Indoor Air Quality Consulting – Mold	$
Mold Inspection	$
Mold Remediation Plan Design	$
Post Mold Remediation Testing & Consulting	$
Laboratory Analysis of Mold	$
Other Mold Services - Describe:	$
Other Mold Services - Describe:	$
TOTAL REVENUES FOR PROFESSIONAL SERVICE	**$**

10. Subcontractors / Subconsultants / Independent Contractors

Please identify the services that are performed on your behalf by others **UNDER written contract**

	Applicable Cost
_____	$_____
_____	$_____
_____	$_____
_____	$_____
_____	$_____

Subcontractors / Subconsultants / Independent Contractors

Please identify the services that are performed on your behalf by others **WITHOUT a written contract**:

	Applicable Cost
_____	$_____
_____	$_____
_____	$_____
_____	$_____
_____	$_____

11. Does your Standard Contract with your Subconsultants / Subcontractors / Independent Contractors contain:

- ☐ Hold Harmless & Indemnification Clause in your favor
- ☐ Detailed Scope of Services Clause
- ☐ Requirement that you be named as an Additional Insured on their CGL Policy
- ☐ Requirement that you be granted a Waiver of Subrogation on their CGL Policy

12. Describe the Minimum Insurance Requirements of your Subconsultants / Subcontractors / Independent Contractors

Commercial General Liability $_____

Contractors Pollution Liability $_____

Professional Liability $_____

Do you require proof of Workers Compensation coverage from all Subconsultants / Subcontractors / Independent Contractors? ☐Yes ☐No

Does your firm collect Certificates of Insurance from All Subcontractors? ☐ Yes ☐ No

13. Do you use a standard indemnity contract with all of your clients? ☐Yes ☐ No If no, please detail your contract procedures:_____

_____

_____

_____

14. Do you loan, lease or rent equipment to others? ☐Yes ☐ No

If yes, describe the equipment: _____

What percentage of your overall sales are associated with this operation: _____

What Commercial General Liability Limits do you require from your clients who use this equipment:

_____

Are you named as additional insured on your clients Commercial General Liability policy? ☐Yes ☐No

Does your client hold harmless and indemnify you for their use of this equipment? ☐Yes ☐No

15. Do you install any type of liner, i.e. landfill, lagoons, etc. ☐Yes ☐ No

If yes, please answer the following:

What percentage of your overall sales are associated with this operation: _____

Please submit the following: Resumes and certifications of employees installing the liners, installation procedures, testing procedures for the installed liner.

16. Do you operate an in-house laboratory? ☐Yes ☐ No

If yes, please answer the following:

What percentage of your overall sales are associated with this operation? _____

17. Do you conduct any type of geotechnical operations?
☐Yes ☐ No If yes, please answer the following:
What percentage of your overall sales are associated with this operation? _____
Please submit the following:
a) A detailed list of your geotechnical operations, and
b) Detailed resumes of employees who conduct these operations.

18. Do you conduct any Phase I or Real Estate Transfer Assessments?
☐Yes ☐ No If yes, please answer the following:
What percentage of your overall sales are associated with this operation: _____

Do you follow ASTM-1527 guidelines?
☐Yes ☐ No If no, attach a sample contract of your format.

19. Has any claim, suit or notice of incident been made against the firm or any staff member?
☐Yes ☐ No If yes, please attach full details on each incident.

_____
_____
_____

20. Is the applicant aware of any circumstances, which may result in any claim, suit or notice of incident against him, the firm, his predecessors in business, any of the present or past partners or officers, or any staff member?
☐Yes ☐No If yes, please attach full details on each incident.

_____
_____
_____

FRAUD WARNING: APPLICABLE TO ALL STATES

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 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.

WARRANTY STATEMENT

The undersigned authorized officer of the applicant declares that the statements set forth herein are True. The undersigned authorized officer agrees that if the information supplied on the application Changes between the date of the application and the effective date of the insurance, he/she (undersigned) will immediately notify the insurer of such changes, and the insurer may withdraw or modify any outstanding quotations and/or authorization or agreement to bind the insurance. Signing of this application does not bind the applicant or the insurer to complete the insurance.

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Notice to applicants:

a) Any person who knowingly and with intent to defraud any insurance company or Other person files an application for insurance containing any false information, or conceals for the Purpose of misleading, information concerning fact material thereto, commits a fraudulent insurance Act, which is a crime.

b) You agree that if the information supplied in the Application changes between the date of this Application and the effective date of the proposed insurance, then you will <u>immediately</u> notify the Underwriters of such changes.

_____
(Signature)

_____
(Title)

_____
(Date)