

**CRC – STERLING WEST INSURANCE SERVICES**  
**CONTRACTOR PROGRAM**  
**SUPPLEMENTAL QUESTIONNAIRE**

**Note: Throughout this questionnaire the words “you” and “your” include all entities seeking coverage.**

1. Applicant Name: \_\_\_\_\_  
 Contractors License #: \_\_\_\_\_ State: \_\_\_\_\_  
 Insured's Website Address: \_\_\_\_\_
2. How many years of experience do you have in the contracting business? \_\_\_\_\_  
 Years in business of entities seeking coverage? \_\_\_\_\_
3. What percentage of your work is: (***EACH*** line must add to 100%)
  - a. Residential: \_\_\_\_\_% Industrial: \_\_\_\_\_% Commercial: \_\_\_\_\_%
  - b. New Construction: \_\_\_\_\_% Structural remodel/additions: \_\_\_\_\_% Non-structural remodel \_\_\_\_\_%
4. What percentage of your work is as a:
 

General Contractor: \_\_\_\_\_% Subcontractor: \_\_\_\_\_% Construction Manager: \_\_\_\_\_%
5. Do you use subcontractors? Yes No If yes, complete the following:
  - a. Percentage of subcontracted work: \_\_\_\_\_ %
  - b. Annual subcontracting costs (including all of subs' labor and materials): \$ \_\_\_\_\_
  - c. List the trades of the subcontractors you use and give the percentage of work they perform:
 

\_\_\_\_\_ % \_\_\_\_\_ % \_\_\_\_\_ %

\_\_\_\_\_ % \_\_\_\_\_ % \_\_\_\_\_ %
  - d. Do you collect certificates from all subcontractors? Yes No What Limit: \_\_\_\_\_
  - e. Do you require all subcontractors to name you as an additional insured: Yes No
  - f. Does your contract with subcontractors include a hold harmless favoring you? Yes No
  - g. How long do you maintain records of the above documents? \_\_\_\_\_
6. List all States that you perform work in? \_\_\_\_\_
7. Gross receipts for the past 4 years and the next 12 months:
 

4<sup>th</sup> year prior \_\_\_\_\_ 3<sup>rd</sup> year prior \_\_\_\_\_ 2<sup>nd</sup> year prior \_\_\_\_\_

last 12 months \_\_\_\_\_ next 12 months \_\_\_\_\_
8. Number of owner, officers, and partners active at job sites or performing supervisory duties:
 

\_\_\_\_\_ X **\$18,600** = \$ \_\_\_\_\_

Payroll of employees other than owners, officers, partners, and clerical \$ \_\_\_\_\_

Cost of leased, temporary, staffing service, casual labor (if not included above) \$ \_\_\_\_\_

**Total Payroll** \$ \_\_\_\_\_
9. Describe your four largest projects over the past five years, including values:
  1. \_\_\_\_\_
  2. \_\_\_\_\_
  3. \_\_\_\_\_
  4. \_\_\_\_\_

10. Describe your two largest projects currently underway or planned for the next year, including values:

1. \_\_\_\_\_

2. \_\_\_\_\_

11. Dollar value of average job completed (including all materials, labor, and equipment): \$ \_\_\_\_\_

12. a. How many new homes will you build as a general contractor in the next year? \_\_\_\_\_

b. What is the greatest number of new homes you have built in any one-year? \_\_\_\_\_

13. Do any prior operations differ substantially in nature from current operations? Yes No

Please explain: \_\_\_\_\_

**14. Note: the following questions apply to work done in any capacity (including general contractors, developers, artisans, remodeling contractors, site work contractors, suppliers, etc.):**

HAVE YOU performed work involving or related to NEW CONSTRUCTION, on or about the premises of:

a. condos / townhouses / duplexes / patio homes Yes No If yes, % done under OCIP: \_\_\_\_%

b. custom-homes Yes No If yes, % done under OCIP: \_\_\_\_%

c. apartments Yes No If yes, % done under OCIP: \_\_\_\_%

d. tracts, PUD's , or any other development, premises or project with more than 2 homes built or planned on sub-divided Yes If yes, % done under OCIP: \_\_\_\_%

Please describe: \_\_\_\_\_

HAVE YOU performed work involving or related to REPAIR / REMODEL, on or about the premises of:

e. condos / townhouses / duplexes / patio homes Yes No If yes, % done under OCIP: \_\_\_\_%

f. custom-homes Yes No If yes, % done under OCIP: \_\_\_\_%

g. apartments Yes No If yes, % done under OCIP: \_\_\_\_%

h. tracts, PUD's , or any other development, premises or project with more than 2 homes built or planned on sub-divided land Yes No If yes, % done under OCIP: \_\_\_\_%

Please describe: \_\_\_\_\_

WILL YOU perform work involving or related to NEW CONSTRUCTION, on or about the premises of:

i. condos / townhouses / duplexes / patio homes Yes No If yes, % done under OCIP: \_\_\_\_%

j. custom-homes Yes No If yes, % done under OCIP: \_\_\_\_%

k. apartments Yes No If yes, % done under OCIP: \_\_\_\_%

l. tracts, PUD's , or any other development, premises or project with more than 2 homes built or planned on sub-divided land Yes No If yes, % done under OCIP: \_\_\_\_%

Please describe: \_\_\_\_\_

WILL YOU perform work involving or related to REPAIR / REMODEL, on or about the premises of:

- m. condos / townhouses / duplexes / patio homes Yes No If yes, % done under OCIP: \_\_\_\_%
- n. custom-homes Yes No If yes, % done under OCIP: \_\_\_\_%
- o. apartments Yes No If yes, % done under OCIP: \_\_\_\_%
- p. tracts, PUD's , or any other development, premises or project with more than 2 homes built or planned on sub-divided land Yes No If yes, % done under OCIP: \_\_\_\_%

Please describe: \_\_\_\_\_

15. Have you ever performed work on hillsides, hilltops, slopes, landfill or other subsidence areas, or do you plan to in the future? Yes No If yes, maximum degree of slope: \_\_\_\_\_

Please describe: \_\_\_\_\_

16. Have or will any of your projects involve caissons, cantilevers, piers, retaining walls, shoring, underpinning, or other heavy structural engineering techniques? Yes

Please describe: \_\_\_\_\_

If retaining walls have been or will be built, maximum height: \_\_\_\_\_ ft

17. Do you perform work above two stories in height (other than interior remodeling)? Yes No

If so, what percentage? \_\_\_\_\_% Maximum height: \_\_\_\_\_ ft

Please describe: \_\_\_\_\_

18. Do you perform any work below ground level? Yes No

If so, what percentage? \_\_\_\_\_% Maximum depth: \_\_\_\_\_ ft

19. Have you or will you build, remove, repair or replace roofs? Yes No % of hot tar:

\_\_\_\_\_ % of torch down: \_\_\_\_\_ Please describe: \_\_\_\_\_

20. Have you or will you perform work for the following types of clients or industries: gas stations, refineries, chemical plants, airports, public utilities, railroads, or hospitals? Yes No

Please describe: \_\_\_\_\_

21. Have you or will you work as a construction manager on a fee basis? Yes No

Have you or will you supervise subcontractors whose payments are run through another entity?

Yes No Please describe: \_\_\_\_\_

22. In the past 3 years have you been fired or replaced on a job in progress? Yes No

In the past 3 years have you replaced another contractor on a job in progress? Yes No

Please describe: \_\_\_\_\_

23. **Note: the following questions apply regardless of whether the applicant was at fault for a claim or incident, and regardless of whether the claim or incident was covered by insurance. Explain any "yes" answers in the space provided below:**

a. Have there been any losses, claims or suits against you in the past 3 years? Yes No

b. Are there any claims or legal actions pending against any of the entities named in the application?

Yes No

c. Do any of the entities named in the application have knowledge of any pre-existing act, omission,

event, condition or damages to any person or property that may potentially give rise to any future claim or legal action against any such entity?      Yes      No

d. Have you been accused of faulty construction in the past 3 years?    Yes      No

e. Have you been accused of breaching a contract in the past 3 years?    Yes

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24. For each of the following activities, check:

Yes: if the activity has or will be performed, subcontracted, or supervised by applicant.

No: if the applicant has never and does not plan to perform, subcontract, or supervise the activity.

	Yes	No		Yes	No
a. demolition			j. process piping		
b. concrete tilt-up construction			k. road/highway/bridge/ overpass construction		
c. LPG work			l. underground tank removal, repair or installation		
d. seismic retrofitting			m. work on gas lines or pumps		
e. swimming pool construction			n. asbestos or lead abatement		
f. boiler installation/repair			o. environmental cleanup		
g. industrial machinery repair or installation (millwright work)			p. dam or levee work		
h. use of cranes			q. traffic signals/control work		
i. rental or equipment to others					

Explain any "yes" answers to Question 24, and state whether performed by insured or subcontracted:

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**WARRANTY:** The purpose of the Supplemental Questionnaire is to assist the underwriting process. Information contained herein is specifically relied upon in determination of insurability. The undersigned, therefore, warrants that the information contained herein is true and accurate to the best of his knowledge, information and belief. This Supplemental Questionnaire, and the application to which it is appended, shall be the basis of any insurance policy that may be issued and will be a part of such policy

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Name and Title: \_\_\_\_\_